

[Insert name of your child care facility or home] CCAP Parent Policies

1. [Insert name of your child care facility or home] will only honor and start child(ren) on the start date listed on the letter authorizing care. If a parent decides to take their child(ren) to the provider before the start date, parent will be responsible for the costs.
2. [Insert name of your child care facility or home] does not accept any verbal authorizations from the counties. All authorizations must be in writing.
3. All parent fees are due by the _____ of the month unless other arrangements have been made in advance. If the parent fee is not paid, care for the child will be discontinued until the parent fee has been paid or adequate payment arrangements have been agreed upon.
4. [Insert name of your child care facility or home] will refuse care to all families who have not paid their parental fee by the _____.
5. Parent is responsible for paying their late fees first and then their parent fee.
6. Parental fee is due EVERY month regardless of the child's attendance.
7. It is the parent's responsibility to ensure that he/she/they have a current authorization, a pinned CCAP card and that he/she/they contact the county if any changes are needed in authorization.
8. It is the parent's responsibility to use his/her/their CCAP card **everyday**.
9. If a parent forgets his/her/their CCAP card said provider will deny care until the parent brings in their CCAP card.
10. The parent will be charged the private pay rate up front each time the client forgets the CCAP card. [Insert name of your child care facility or home] will refund the payment or apply it to any outstanding parent fee if the client returns with the card and successfully records attendance.
11. A parent is allowed to forget his/her/their CCAP card _____ times before said provider will deny care until he/she/they can produce his/her/their card.
12. If a denied or pending message appears on the receipt, [Insert name of your child care facility or home] will not provide care until that message has been cleared. The parent will need to correct denied or pending swipes within 9 days (including the weekend) or contact his/her/their CCAP case worker to have this fixed.
13. If a parent misses a swipe or a denied message appears, the parent will be financially responsible for the days of attendance that can not be corrected by previous check in/check outs on the POS device or are not corrected within the 9 days.
14. Most counties allow only three absences per month. After three absences, the center is to report the lack of attendance to the case worker.
15. [Insert name of your child care facility or home] has the right to bill the parent their private rate for absences that exceed three within one month.
16. The CCAP card is not to be left in the possession of [Insert name of your child care facility or home] or any of its employees under any circumstances.
17. **If a CCAP is left on accident or found on the premises, [Insert name of your child care facility or home] will hold the card at the front until the remainder of the day to be claimed. If not claimed by the end of the day [Insert name of your child care facility or home] will discard the card or mail it back to the county.**
18. Parents are responsible for reporting any lost, misplaced or stolen CCAP cards to their CCAP case worker immediately, and requesting new ones.

I agree to all of the statements above and I agree to be in good standing with [Insert name of your child care facility or home].

Parent Guardian Signature

Date

Provider Signature

Date

Developed by: