

# Day Care Provider Information

(return this with your application)

Name: \_\_\_\_\_

Child's Name/Age	Name of Provider/address/phone	Drop off time	Pick up time	TOTAL Amount charged per week

**What days of the week do you work: (circle)**

**Monday   Tuesday   Wednesday   Thursday   Friday   Sat.   Sun.**

**What hours do you work?** \_\_\_\_\_

\_\_\_\_\_

When choosing a provider you may want to ask them the following questions in regards to billing:

- If you work part-time, do they offer a part-time program?
- Does the provider have a contract with Rensselaer County DSS?
- Is the provider familiar with Rensselaer County DSS?
- Discuss with your provider that DSS can pay up to market rate and can pay for absences with a contract. Remember you *may* be responsible for absences and costs above market rate in addition to your parent share.
- If your provider (day care centers and family day care only) has not worked with Rensselaer County Department of Social Services in the past, they will need to become a vendor. This involves paperwork to be completed by the provider.

If you need assistance locating a provider please contact the Child Care Coordinating Council at 426-7181.