



Town of Harwich

Harwich Community Center • 100 Oak Street • Harwich, MA 02645

Tel: 508-430-7550 • Fax: 508-430-7530

Preschool Family Support Grant Program

Application for FY 2024

The Harwich Preschool Family Support Grant Program, funded by the 2023 Annual Town Meeting, is intended to make preschool in the Town more affordable for all Town residents, regardless of income. Each eligible child will receive a grant of no more than \$4,000/year, subject to certain limitations, which funds shall be paid directly to a licensed preschool or day care provider.

For purposes of this program, an eligible applicant is a Harwich resident who is the parent or legal guardian of a child who will, on or before August 31, 2023, be 3 or 4 years old.

Where this form requests government assistance, it will be kept confidential to the extent permitted by law.

A. Parent or Guardian Information

1. Name of Parent(s) or Guardian(s):

2. Residential Address: _____

Town/City: _____ State: _____ Zip _____ Rental Home? Yes No

3. Mailing address (if different): _____

Town/City: _____ State: _____ Zip _____ Rental Home? Yes No

4. Phone: _____ Mobile? Yes No

5. E-mail: _____ Private? Yes No

B. Participant Information

1. Name of Child: _____ Date of Birth: _____

2. Name of Eligible Sibling _____ Date of Birth _____

C. Provider Information

1. Name of licensed preschool/child care provider where child is enrolled:

2. License #: _____

3. Licensed Provider Address:

Town/City: _____ State: _____ Zip: _____

4. Licensed Provider Contact Information:

Name: _____

Phone: _____

E-mail: _____

5. Use of Licensed Provider: _____ hours per day; _____ days per week.

D. MA State Voucher Information

1. Is your child's tuition paid with a MA State Voucher? Yes No

To check income eligibility for MA State Early Education and Care Childcare Voucher, visit the following link:

<https://www.mass.gov/guides/early-education-and-care-financial-assistance-for-families#-eligibility-requirements->

2. If yes:

a. MA Childcare Voucher Parent Monthly Parent/Guardian Co-Pay \$ _____

b. MA Childcare Voucher Parent Identification Number: _____

Yes, I would like to have a confidential conversation about how to access licensed child care, food, diapers, clothing, books and educational supplies, affordable housing, fuel assistance, free family playgroups, support groups and parent education.

E. Additional Required Documentation

See Page 4.

I, _____, hereby swear and confirm, under the penalties of perjury, that all the information provided above is true and accurate, and, further, that:

1. *The public funds grant funds requested are for uses consistent with the Preschool Family Support Grant program only, and that requesting such funds if I am not eligible, or using such funds in a manner inconsistent with the program, may expose me to enforcement action by the Town or other appropriate authority and could also impact eligibility for other state or local grants;*
2. *I am a full-time resident of the Town of Harwich;*
3. *I am the parent or legal guardian of the child(ren) named above;*
4. *I am using a licensed provider for preschool or childcare purposes;*
5. *I am required to and will notify the Town forthwith if the number of hours per day or days per week that I use the licensed provider changes or if the use terminates altogether;*
6. *I expressly and without limitation confirm my understanding that the Preschool Family Support Grant for which I am applying will not be paid to me directly, at any time, and will, instead, be paid directly to the licensed preschool or childcare provider.*

Signature of Parent or Guardian

Date

SEE NEXT PAGE

REQUIRED DOCUMENTATION FOR HARWICH FAMILY SUPPORT GRANT APPLICATION:

- Signed and completed application form, **and**
- Copy of Parent/Legal Guardian's Photo ID, **and**
- Copy of Child's Birth Certificate **OR** Child's Valid Passport, **and**

*Please also include a copy of **one** of these documents (please do not send the original document):*

- Harwich Real Estate Tax bill for the current year in the name of the parent/guardian, **or**
- Lease for Harwich property in the name of parent/guardian, **or**
- Utility Bill in parent/guardian's name at a Harwich address, dated within the last sixty (60) days, **or**
- Excise Tax Bill for the current year in parent/guardian's name at a Harwich address, **or**
- Auto Insurance Policy for the current year in parent/guardian's name, with a Harwich garaging address, **or**
- MassHealth Correspondence in parent/guardian's name at a Harwich address, dated within the last sixty (60) days, **or**
- Bank Statement in parent/guardian's name at a Harwich address, dated within the last sixty (60) days, **or**
- Credit Card Statement in parent/guardian's name at a Harwich address, dated within the last sixty (60) days, **or**
- Cell Phone Bill in parent/guardian's name at a Harwich address, dated within the last sixty (60) days, **or**
- Pay Stub in parent/guardian's name with Harwich address, dated within the last sixty (60) days

If applicable:

- Copy of your child's MA State Childcare Voucher with Family Identification number and the parent/guardian monthly co-pay amount