



2023 Caltech Child Care Assistance Program Application

Mail completed form to:
CCAP Program (Personal & Confidential)
1200 E. California Blvd.
Mail Code 161-84
Pasadena, CA 91125

Applications must be received or postmarked by 11/1/2022. Faxed, emailed or late applications will not be accepted.

APPLICANT INFORMATION:

Name: _____

Street Address: _____

Caltech UID: _____

City/State/Zip: _____

Email Address: _____

Phone: _____

Caltech Affiliation:

Faculty

Campus Staff

Postdoctoral Scholar

Graduate Student

SPOUSE/DOMESTIC PARTNER INFORMATION:

Name: _____

Employment:

Employed at least 50% time

Not Employed

Full-time student

Ineligible to work in US due to visa status (please provide I-94)

DEPENDENT INFORMATION (Children aged 10 and younger, please list from youngest to oldest):

Name of Child:

Birth Date:

1. _____

2. _____

3. _____

4. _____

HOUSEHOLD INCOME:

| | |
|--|----------------|
| 1. CCAP Applicant Gross salary (complete one line unless you have multiple jobs): | Annual Income |
| a) Monthly paycheck: \$_____ (wage) x 12 = | \$_____ |
| b) Biweekly paycheck (every other week): \$_____ (wage) x 26 = | \$_____ |
| c) Semi-monthly paycheck (twice a month): \$_____ (wage) x 24 = | \$_____ |
| d) Hourly \$_____ (wage) x _____ (hrs worked per week) x 52= | \$_____ |
| 2. Spouse/Domestic Partner Gross Salary (complete one line unless you have multiple jobs): | |
| a) Monthly paycheck: \$_____ (wage) x 12 = | \$_____ |
| b) Biweekly paycheck (every other week): \$_____ (wage) x 26 = | \$_____ |
| c) Semi-monthly paycheck: \$_____ (wage) x 24 = | \$_____ |
| d) Hourly \$_____ (wage) x _____ (hrs worked per week) x 52= | \$_____ |
| 3. Other family Income: | |
| Child Support (monthly amount) | \$_____ |
| Bonus | \$_____ |
| Spousal Support (monthly amount) | \$_____ |
| Unemployment (monthly amount) | \$_____ |
| Sales Commission | \$_____ |
| Other (such as Veteran's Benefits, AFDC, welfare) | \$_____ |
| TOTAL 2023 TOTAL PROJECTED FAMILY GROSS INCOME*: | \$_____ |

** To be eligible for 2023 CCAP assistance, an applicant's projected total family annual gross income can be no greater than \$132,500.*

Please enclose:

- Applicant's 2 most recent paystubs
- Spouse/Domestic Partner's 2 most recent paystubs
- If your spouse is not employed, documentation verifying one of the following:
 - that he/she is a full time student
 - that he/she is considered legally disabled and cannot work
 - that he/she cannot work due to visa restrictions (I-94 electronic record)
- Copies of Birth Certificates for all children ages 10 and under
- Legal Guardian verification (if applicable)
- Copy of your 2021 Federal Income Tax Returns (must include pages showing dependents, gross income line and signatures)

I (We) declare that the information reported is true, correct, and complete. I (We) agree to provide, if requested any necessary documentation to support the information requested.

Applicant Signature/Date

Spouse/Domestic Partner Signature/Date