Limitation of Eligibility - Vocational Training

I understand that I am eligible for child care services because I am a student enrolled in a vocational training or an educational program that leads to a vocational goal.

My vocational goal is: ___________________________________________________________

I am attending a training institution that is accredited or allowable by state guidelines. (For on-line classes, the training institution must be recognized by the U.S. Department of Education.)

I will receive child care services for 12 months at a time. I can establish on-going eligibility if I meet the following requirements:

- My gross monthly income adjusted for family size does not exceed 85% of the State Median Income.
- I submit documentation to verify my need for child care as a student enrolled at an accredited/approved institution.
- I make adequate progress by maintaining a minimum GPA of 2.0. If my GPA is below 2.0 for two consecutive certification periods, my approved child care services for vocational training will end and I will be ineligible for services as a student for six (6) months. To document adequate progress, I must submit grades. If I do not receive grades, I must provide documentation of adequate progress from my vocational training institution.
- I remain eligible under all other program rules.

I further acknowledge that I am eligible to receive child care services as a student for:

- Six (6) years from my first date of services as a student on the program (even if services are not continuous) if I do not have a Bachelor’s Degree.
- No more than 24 semester units or its equivalent taken after receiving my Bachelor’s Degree, not to exceed the six-year limit.

I have reviewed the above information and understand that I am responsible for providing the documentation to verify my vocational training status for initial and on-going eligibility for child care services.

Name of Parent/Caretaker (Please Print) __________________________________________

Signature of Parent/Caretaker ____________________________ Date ______________