Childcare Service/OSCAR Programme supervisor's form

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

The information is required under section 298 of the Social Security Act 2018.

Keep this application moving

So the subsidy can start from the day the child starts the programme, we need the application before the child's first day. This is especially important for school holidays.

Childcare service/ OSCAR programme details

1 What is the name of your childcare service/OSCAR programme?

Camp Columba Charitable Trust Dad programme single Dad

2 What is your Work and Income childcare service/OSCAR provider number?

9 0 0 | 0 2 0 | 4 4 2

3 What are your organisation's contact details?

Work phone	(03) 205 3702
Mobile phone	( )
Email	holidaycamps@campcolumba.org.nz

INFORMATION FOR Q4:
If you offer 20 Hours ECE you can't charge a fee for those hours unless you're a home-based educator and charge a top-up fee.

4 Does your childcare service offer 20 Hours ECE?

☑ No ☐ Yes

5 Do you charge a holding or absence fee?

☑ No ☐ Yes

HOW TO ANSWER Q6:
Please tell us your fee **after** you've applied any discount but **before** any Work and Income subsidy is applied.

The Childcare Subsidy can't be used for donations or optional charges, but can be used for the top-up fee.

INFORMATION FOR Q6:
Where we say ECE in this question we mean 20 Hours ECE.

6 Please provide details of the care for each child.

Child 1 Full name

Care start date Day	Month	Year	20 Hours ECE start date (if applicable) Day	Month	Year	Top-up fee start date (if applicable) Day	Month	Year

Enrolment times	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Enrolled hours							
ECE hours used (if applicable)							

Type of childcare	Childcare provider	Home-based	OSCAR provider
Total hours each week			7
ECE top-up fee charged to caregiver per hour		$	
Total weekly fee charged to caregiver (don't include ECE)	$	$	$ 50

OSCAR care period end date	/ /

Child 2 Full name

Care start date			20 Hours ECE start date (if applicable)			Top-up fee start date (if applicable)		
Day	Month	Year	Day	Month	Year	Day	Month	Year

Enrolment times	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Enrolled hours							
ECE hours used (if applicable)							

Type of childcare	Childcare provider	Home-based	OSCAR provider
Total hours each week			
ECE top-up fee charged to caregiver per hour		$	
Total weekly fee charged to caregiver (don't include ECE)	$	$	$

OSCAR care period end date	/ /

Child 3 Full name

Care start date			20 Hours ECE start date (if applicable)			Top-up fee start date (if applicable)		
Day	Month	Year	Day	Month	Year	Day	Month	Year

Enrolment times	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Enrolled hours							
ECE hours used (if applicable)							

Type of childcare	Childcare provider	Home-based	OSCAR provider
Total hours each week			
ECE top-up fee charged to caregiver per hour		$	
Total weekly fee charged to caregiver (don't include ECE)	$	$	$

OSCAR care period end date	/ /

ATTACHMENT FOR Q6:
If you provide childcare for a fourth child please provide this information for that child on a separate piece of paper and attach it to this form.

7 **Write any comments here**

Supervisor's statement

- The information I have provided is true and complete.
- I have authority to complete this form for my organisation.

Supervisor's name (print)	Supervisor's signature	Day	Month	Year
Levi Goodall		21	10	25