

Revised: March 1, 2023

Based on legislation<sup>1</sup>, it is generally expected that all parents will apply together for subsidy, meaning all parents must meet the eligibility criteria to determine parental contribution.

Fill out this declaration to confirm your family status and eligibility for Child Care Subsidy.

l,		dated at:	on:				
•	[First name and last name]	[city or town]	[date]				
de	declare all information on this form to be true.						
	1. Other Parent's Information						
	Fill out costions 2 and 4 only if w	ou roquiro caoco for additional	l athar parants				
	Fill out sections 3 and 4 only if you require space for additional other parents.						
a)	Name of other parent:						
a) b)	Birthdate of other parent:						
	·	f. kla. a. f. a. ll. a					
c)	The other parent is the parent o	t the following child(ren):					
	Name of Child	Date of birth	Does child require care?				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
			☐ Yes ☐ No				
d)	d) What is the Other Parent's relationship with the child(ren)? Choose an item.  Settled Intent is when a person has shown intention to treat a child as a member of his or						
	her family, are living together and has a strong relationship with the child.						
e)	e) The other parent has Choose an item. custody.						
,			I \				
T)	f) My current relationship with the other parent is (check <b>all</b> that apply):  ☐ Married ☐ Separated ☐ Not in a relationship						
	☐ Living Common-Law		Never in a relationship				
	☐ Widowed ☐	☐ Co-parenting	•				
g)	Do you live with the other paren	t of this child? 🗆 Yes 🗆 No					
h)	Address and phone number of o	ther parent if known:					



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Name			Relati	onship to Me	Effective Date of Co-residency (yyyy-mm-dd)			
	2. List all adults living at your current address:							
IT	If you answered <b>Yes</b> , please provide a copy to your Children's Services Worker.							
	m) I have a legal or notarized document such as a court order, separation							
	Agencies such as Bank, Doctor, Children's Aid Society, and ☐ Yes ☐ No Housing Authority							
	Daycare School	☐ Yes ☐ No Yes ☐ No		Police	☐ Yes	□No		
l)	The other parent Family/friends	and I are know □ Yes □ No	•	es by: Place of worship	□ Yes	□ No		
	Life Insurance	☐ Yes ☐ No		Last Will, and Testament	☐ Yes	□ No		
k)	The other parent Car Insurance	and I share: □ Yes □ No		Pension Plan	☐ Yes	□ No		
	Businesses Vehicles	☐ Yes ☐ No		Property	☐ Yes ☐ Yes	□ No		
j)	I co-own assets, w Bank Accounts	☐ Yes ☐ No	•	Investments	□ Yes	_		
	Vehicle costs Credit card(s)	☐ Yes ☐ No		Dental care	□ Yes	□No		
i)	I share expenses we wortgage/Rent Utilities	with the other   □ Yes □ No □ Yes □ No	)	n as: Child Care Health care	□ Yes	□ No		



3. Other Parent's Information

### Family Composition Declaration – Child Care Subsidy

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Complete section 3 and 4 only if your children have other parents in addition to what you listed in section 1. If there are no other parents, proceed to section 5, page 6.

a) b)	•						
c)	The other parent is the parent of the following child(ren):						
	Name of Child	D	ate of birth	Does child require care?			
				☐ Yes ☐ No			
				☐ Yes ☐ No			
				☐ Yes ☐ No			
				☐ Yes ☐ No			
				☐ Yes ☐ No			
				☐ Yes ☐ No			
d) ≘) f)	What is the Other Parent's r  Settled Intent is when a personal pe	son has shown er and has a stro custo	intention to treat a ong relationship wit ody. ent is (check <b>all</b> that	h the child.			
	$\square$ Widowed	☐ Co-parent	ting	·			
g)	Do you live with the other parent of this child? $\ \square$ Yes $\ \square$ No						
h)	Address and phone number	of other paren	t if known:				
i)	I share expenses with the other Mortgage/Rent Yes Utilities Yes Vehicle costs Yes Credit card(s) Yes	□ No □ No □ No	n as: Child Care Health care Dental care	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No			



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j)	I co-own assets, v Bank Accounts	vith the oth $\Box$ Yes $\Box$	•	as: Investments	□ Yes	□ No		
	Businesses	☐ Yes ☐	] No	Property		□ No		
	Vehicles	□ Yes □	] No					
k)	The other parent	and I share	::					
	Car Insurance	☐ Yes ☐	l No	Pension Plan	☐ Yes	□ No		
	Life Insurance	☐ Yes ☐	l No	Last Will, and Testament	☐ Yes	□ No		
I)	The other parent		•	•	_			
	Family/friends	☐ Yes ☐		Place of worship	☐ Yes			
	Daycare	☐ Yes ☐		Police	☐ Yes	□ No		
	School Agencies such as Housing Authori		_	Aid Society, and	☐ Yes	□No		
11	If you answered <b>Yes</b> , please provide a copy to your Children's Services Worker. <b>4. Other Parent's Information</b>							
	4. Other rurent	3 illioilliati						
a)	Name of other pa	rent:						
b)	Birthdate of othe	r parent:						
c)	c) The other parent is the parent of the following child(ren):							
	Name of	Child	D	ate of birth	Does	child require care?		
						☐ Yes ☐ No		
						☐ Yes ☐ No		
						☐ Yes ☐ No		
						☐ Yes ☐ No		
						☐ Yes ☐ No		
						□ Voc. □ No		

# Region of Peel working with you

# Family Composition Declaration – Child Care Subsidy

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d)	What is the Other Parent's relationship with the child(ren)?  Settled Intent is when a person has shown intention to treat a child as a member of his or							
	her family, are livi	•						
e)	The other parent	has	custo	ody.				
f)	My current relation  ☐ Married ☐ Living Common	·	the other pare  Separated  Divorced  Co-parent	1	hat apply): □ Not in a □ Never i		=	
g)	Do you live with t	he other pa	rent of this chi	ild? □ Yes □	No			
h)	Address and phor	ne number o	of other parent	if known:				
i)	I share expenses v	with the oth	ner parent such	ı as:				
	Mortgage/Rent	☐ Yes ☐	No	Child Care	☐ Yes	□No		
	Utilities	☐ Yes ☐	No	Health care	$\square$ Yes	$\square$ No		
	Vehicle costs	☐ Yes ☐	No	Dental care	☐ Yes	$\square$ No		
	Credit card(s)	□ Yes □	No					
j)	I co-own assets, with the other parent such as:							
	Bank Accounts	□ Yes □	No	Investments	☐ Yes	□No		
	Businesses	☐ Yes ☐	No	Property	☐ Yes	□No		
	Vehicles	□ Yes □	No					
k)	The other parent	and I share:	:					
,	Car Insurance	☐ Yes ☐		Pension Plan	☐ Yes	□No		
	Life Insurance	□ Yes □	No	Last Will, and	☐ Yes	$\square$ No		
				Testament				
I)	The other parent	and I are kn	nown as spouse	•				
	Family/friends	☐ Yes ☐	□No	Place of worship	○ □ Yes	□ No		
	Daycare	☐ Yes ☐	_	Police	☐ Yes	□ No		
	School	☐ Yes ☐	_			_		
	Agencies such as Housing Authori		tor, Children's i	Aid Society, and	☐ Yes	□ No		
m	) I have a legal or agreement, divo				-		□ Yes	□No
, ,	situation betwee	·='	=		5 a m 2 3 4 4	l		
11	you answered Yes	niease pro	ivide a convito	vour unilaren's '	SERVICES W/	orker		



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### 5. Acknowledgement of provided information. Please check Yes or No

understand that:							
a)	The information I provided in this Declaration is being used to decide my initial and ongoing eligibility for child care subsidy and to deliver the child care subsidy program under the <i>Child Care and Early Years Act, 2014</i> .		□ No				
b)	I will tell my Children's Services Worker within 2 weeks of any change in information provided in this declaration, as outlined in the <a href="Child Care">Child Care</a> <a href="Subsidy Parent Agreement">Subsidy Parent Agreement</a> .	the □ Yes	□ No				
c)	<ul> <li>If I do not provide my Children's Services Worker with up-to-date information, I hold back information or I knowingly provide false information: <ul> <li>I may be found to be ineligible for Child Care Subsidy</li> <li>My subsidy may end immediately</li> <li>I may have an overpayment that I will need to repay to the Region and/or</li> <li>Legal action may be taken.</li> </ul> </li> </ul>	□ Yes	□ No				
d)	The Region of Peel has permission to collect information about me from other sources to verify my initial, ongoing, or past eligibility, under the Cl Care and Early Years Act, 2014, section 71(1).	☐ Yes nild	□ No				
<b>DISCLAIMER</b> : By typing your name below, you are signing this application electronically. You agree							
tha	at your electronic signature is legally the same as your written signature or	n this form.					
Ар	Applicant Signature Date						

#### Notice with Respect to the Collection of Personal Information

(Municipal Freedom of Information and Protection of Privacy Act)

This information is being collected under the legal authority of the Child Care and Early Years Act, 2014, and thereafter; for the purpose of administering Government of Ontario child care subsidy. For more information contact Privacy Officer: Human Services Privacy Lead at (905) 791-7800 ext. 8984 at the Region of Peel.

#### **Footnotes:**

<sup>&</sup>lt;sup>1</sup>: Legislation: Child Care and Early Years Act, Family Law Act.