

## U.S. Coast Guard Child Care Subsidy Program Benefit Information

The U.S. Coast Guard Child Care Subsidy Benefit program was created to assist U.S. Coast Guard Members who use any federal child care center, or any state licensed child care facility in the Continental US (CONUS) and outside the Continental US (OCONUS) which includes child development centers as well as in licensed home child care providers to provide childcare for their children.

The benefit is available to Active Duty Crew Members and Active Duty Reservists called to action for 180 days or longer. Families will qualify for subsidy benefits in accordance with the U.S. Coast Guard Child Care Subsidy Benefit Table and is based upon the Member's Total Family Income (TFI) (TFI = Adjusted Gross Income (AGI) + Annual BAS + Annual BAH II).

Eligibility to receive benefits can only be determined once all documents have been submitted to the GSA Subsidy Administration Section for review. A determination of benefits will be completed at which time the Member will receive an email from the GSA informing them of the benefit that they may be entitled to and the effective date. ***Please be advised that the Member/Family is financially responsible for all child care costs until the Member/Family has been informed by the GSA that a U.S. Coast Guard Subsidy benefit has been approved on the Member's behalf.***

In order to apply for benefits the Member must complete and submit to the GSA Child Care Subsidy Section the following documents:

### Member/Family Information *(Application must be completed within 30 days of receipt of initial document(s))*

- Parent Child Care Application, OPM Form 1643
- U.S. Coast Guard Child Care Subsidy Application Addendum USCG Form 2011-02
- Two (2) Leave and Earnings Statements (LES) for the qualifying USCG Member  
***Must be dated within 90 days of the date of the Member's initial application and be consecutive pay periods***
- Copy of the Member's Active Duty Orders or a print out of Direct Access in the Self Service area of the Member's status. (Log into Direct Access - Home - Self Service - Employee - View – Background Tab)
- A copy of the Member's **most recent** Federal Tax Return Form 1040 along with any schedules that were included with the Member's return
- A copy of the Member's BAH/Dependency Data Sheet CG Form 4170, must be signed and dated within the last year, certifying that the information contained on the form is correct
- A copy of the child's mother, father or other income earning partners, 4 weeks/1 month most recent pay statement(s) or student school schedule that meets one or more of the following:
  - a) Spouse/partner must be working a minimum of 20 hours per week
  - b) Actively seeking employment
  - c) Enrolled in school full time
  - d) In the process of enrolling in school full time
  - e) A combination of work and school
- A copy of the Member's spouse/partner's **most recent** Federal Tax Return, Form 1040 if filed separately

### Provider Information

- U.S. Coast Guard Family Enrollment Provider Cost Verification Form USCG 2015-01
- A copy of your qualifying child care provider's license or letter of accreditation



## U.S. Coast Guard Child Care Subsidy Program Benefit Information (Continued)

The forms and documents listed on page 1 of this document are required for a standard application. Please note that your situation and application may require additional documents and/or information.

The complete application package should be submitted directly to GSA for processing via email or fax.

Upon receipt of the application package, the GSA will calculate the benefit for which the qualifying Member may be eligible and will notify the family as well as their child care facility via email.

The child care facility will receive a benefit package that will include the following documents:

- a) Provider Benefit Acceptance Letter; instructions on billing the GSA on behalf of the U.S. Coast Guard
- b) Invoice(s) to bring the Member's account current
- c) A sample invoice to be used for future billings. The child care facility will then be responsible for billing the GSA on a monthly basis for childcare services on behalf of the Member. The subsidy will be paid directly to the child care provider and the family's bill will reflect the reduction in cost that will result from this subsidy. Invoices must be submitted within 90 days of the end of the period of service in order for payment to be issued. Invoices submitted after 90 days following the end of the period of service will not be eligible for payment resulting in the Member being financially responsible for the child care cost incurred for that period of service.

If you have any questions or need any additional assistance, please feel free to contact the GSA Child Care Subsidy Section at (866) 508-0371.

Please note that policies, procedures and/or information required to complete the application process are subject to change at any time at the discretion of the U.S. Coast Guard.

GSA/U.S. Coast Guard Child Care Subsidy Team  
Fax: (816) 823-5445  
Email: [uscgchildcare@gsa.gov](mailto:uscgchildcare@gsa.gov)

### U.S. Coast Guard Child Care Subsidy Program Update

Fee Category	Total Family Income (TFI)	Member Minimum Portion Per Week	Member Minimum Portion Per Month	Maximum Benefit Child #1	Maximum Benefit Child #2	Maximum Benefit Child #3
I	0 – 30,466	\$58	\$251	\$7,800	\$6,800	\$6,800
II	30,467 - 36,993	\$73	\$316	\$6,630	\$5,630	\$5,630
III	36,994 - 47,873	\$89	\$386	\$5,320	\$4,320	\$4,320
IV	47,874 – 59,841	\$103	\$446	\$4,800	\$3,800	\$3,800
V	59,842 - 76,162	\$119	\$516	\$4,020	\$3,020	\$3,020
VI	76,163 – 88,079	\$130	\$563	\$3,240	\$2,240	\$2,240
VII	88,080 - 103,622	\$134	\$581	\$2,560	\$1,560	\$1,560
VIII	103,623 – 129,572	\$138	\$598	\$1,680	\$680	\$680
IX	129,573 & Above	\$142	\$615	\$900	0	0

## U.S. Coast Guard (USCG) Child Care Subsidy Application Checklist

\_\_\_\_\_ Printed name of qualifying USCG Member

Please submit the following completed documentation in this order to assist us in expediting the Member's application for benefits:

\_\_\_\_\_ U.S. Coast Guard Child Care Program Member Statement of Understanding (**Mandatory**)

\_\_\_\_\_ Parent Application OPM Form 1643 (**Mandatory**)

\_\_\_\_\_ Application Addendum USCG Form 2011-02 (**Mandatory**)

\_\_\_\_\_ Two (2) Leave and Earnings Statements (LES) for the qualifying USCG Member (**Mandatory**) **\*Must be dated within 90 days of the date of your initial application and be consecutive periods of pay**

\_\_\_\_\_ Copy of the Member's Active Duty Orders or a print out of Direct Access in the Self Service area of your status. (Log into Direct Access - Home - Self Service - Employee - View - Background Tab) (**Mandatory**)

\_\_\_\_\_ Copy of the Member's most recently filed Federal Tax Return - Only Form 1040/1040A/1040EZ, **UNLESS** business income/loss, capital gains/losses, other gains/losses, rental real estate, royalties, or pension and/or annuities, are listed on the Form 1040/1040A. In this case the complete tax return must be submitted to determine which figures may be included or excluded in the calculation of benefits. (**Mandatory**)

\_\_\_\_\_ BAH Dependency Data Sheet CG Form 4170 that has been signed and dated within the last year (**Mandatory**)

\_\_\_\_\_ Power of Attorney (**as applicable**)

\_\_\_\_\_ Misc. Legal Documentation - Divorce Decree, Separation Documents, etc. (**as applicable**)

\_\_\_\_\_ Copy of the spouse/partner, to include unmarried legal parents/partners, 4 weeks/1 month most recent pay statement(s) reflecting a minimum of 20 hours per week or full time school schedule and USCG Certification of Higher Education Form 2015-09

\_\_\_\_\_ Certification for Seeking Employment or Enrolling in School - USCG Form 2010-04 (**if applicable**)

\_\_\_\_\_ Copy of the spouse/partner's most recent Federal Tax Return if filed separately (**Mandatory**)

\_\_\_\_\_ Family Enrollment Provider Cost Verification Form USCG 2015-01 (**Mandatory - To be completed by your qualifying provider**)

The forms and documents listed above are required for a standard application. Please note that your situation and application may require additional documents and or information.

Fax: (816) 823-5445 Scan and email to: [uscgchildcare@gsa.gov](mailto:uscgchildcare@gsa.gov)

U.S. Mail: GSA, Subsidy Administration Section  
2300 Main St - 2SE  
Kansas City, MO 64108

U.S. General Services Administration  
2300 Main St - 2SE, KCMO 64108  
Tel: (866) 508-0371 • Fax: (816) 823-5445  
[uscgchildcare@gsa.gov](mailto:uscgchildcare@gsa.gov)  
USCG 2012-04

## U.S. Coast Guard Child Care Subsidy Program Member Statement of Understanding

- ◆ Families are financially responsible for all child care costs until a U.S. Coast Guard Child Care Subsidy Benefit has been awarded and accepted by both the Member and child care provider.
- ◆ Families are eligible for USCG Child Care Subsidy benefit only if/when their application has been approved.
- ◆ Families participating in other subsidy benefit programs may be eligible for a USCG Child Care Subsidy Benefit, however the benefit is calculated after these discounts have been applied to the standard rate.
- ◆ You must be in an **Active Duty Status** with the U.S. Coast Guard in order to be eligible to receive benefits under this program. Any change in your status with the U.S. Coast Guard must be reported to the GSA Subsidy Administration Section immediately for further review.
- ◆ You must notify the GSA Subsidy Administration Section if and when your child is no longer enrolled with the qualified child care provider identified on your application. The subsidy is not transferable to another child care provider. You must reapply for the subsidy should you change child care arrangements.
- ◆ Invoices must be submitted to the GSA Subsidy Administration Section on a monthly basis in order for the USCG Child Care Subsidy Benefit to be paid. Invoices must be properly completed and submitted to the GSA within 90 days of the period of service in order for payment to be issued. Invoices submitted after 90 days following the end of the period of service will not be eligible for payment resulting in the Member being financially responsible for the child care cost incurred for that period of service.
- ◆ Any change to the families cost for any reason must be reported to the GSA Subsidy Administration Section as soon it has been identified.
- ◆ If your child care provider's standing with their state child care licensing authority changes or is revoked, this information must be reported to the GSA Subsidy Administration Section immediately.
- ◆ You are responsible for reporting any changes in your personal and/or financial situation, or that of your spouse/partner, that may affect your status as a U.S. Coast Guard Child Care Subsidy recipient; such as but not limited to any change in employment, school enrollment, marriage, divorce, a partner who has entered or left the home, etc. Failure to promptly report any change to the GSA Subsidy Administration Section that causes an erroneous payment on your behalf may result in your Child Care Subsidy Benefit being terminated and subsequent collection action of the erroneous payment from you.
- ◆ As a participant in the USCG Child Care Subsidy Program, you agree to provide any and all information requested by the GSA Subsidy Administration Section and/or the USCG related to your application, payments issued on your behalf, eligibility and the child care costs charged to you by your provider.
- ◆ Due to the variation of oversight and regulation in different states and based upon official USCG guidance, the GSA Subsidy Administration Section reserves the right to determine which types of child care providers in each state meet the minimum eligibility requirements for participation in USCG Child Care Subsidy Program.
- ◆ Any program policy infraction to include but not limited to providing incorrect child care cost, knowingly or unknowingly which causes an overpayment of a USCG Child Care Subsidy benefit may result in you being disqualification from the program. In addition repayment of monies received due to this misrepresentation will be required.

By completing the application process through the GSA Subsidy Administration Section, I attest that I have received, read and understand the U.S. Coast Guard Child Care Subsidy Program guidelines as set forth in the handbook

\_\_\_\_\_  
*Signature of U.S. Coast Guard Member*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name of U.S. Coast Guard Member*

\_\_\_\_\_  
*Last 4 of SSN*

Parents who misrepresent information used to calculate their subsidy benefit may have their subsidy benefit terminated and be subject to the Uniform Code of Military Justice (UCMJ) and/or other legal consequences.

# CHILD CARE SUBSIDY APPLICATION FORM DEPARTMENT \_\_\_\_\_

*(Insert Federal Agency Name)*

The department \_\_\_\_\_ may contact the applicant to request clarification on the subsidy application.

*(Insert name of organization administering the program)*

You must attach the following documents:

1. Pay statements for the most recent two pay periods for each parent or guardian;
2. A copy of your most recent Federal and State income tax returns;
3. A copy of your child care provider's most recent license or statement of compliance with State and/or local child care regulations; and
4. A completed OPM form 1644, signed by the provider(s) below.

## Section I - Parent / Legal Guardian Information

Applications that are not fully completed or do not contain the information listed below will not be processed and will be returned to the applicant. If you do not provide all of the information requested, you will not receive a subsidy award. When more than one parent works for the Federal Government, subsidies cannot be awarded for the child/children by more than one Federal agency.

1. Name <i>(Last, first, middle initial)</i>		2. Social Security Number (SSN)	3. Grade
4. Work address <i>(Include street number, city, state and ZIP code)</i>		5. Work e-mail address	
		6. Work telephone number	
7. Home address <i>(Include street number, city, state and ZIP code)</i>		8. Home e-mail address	
		9. Home telephone number	
10. Category of parent  Single  Couple	11. Spouse federal employee  Yes  No	12. Name of spouse <i>(Last, first, middle initial)</i>	
		13. Employing agency of spouse	14. Grade of spouse
15. Total family income as reported on adjusted gross income line of most recent IRS form 1040/1040A <span style="float: right;"><i>*Include a copy of the IRS form</i></span>			

## Section II - Child Information

List information for all children for whom you are applying for a subsidy. *(If you are applying for more than three children please attach the pertinent information to this form)*

1a. Name of first child	b. SSN of child	c. Date of birth <i>(MM/DD/YYYY)</i>
d. Name of child care provider	e. Weekly child care cost	f. Date of enrollment <i>(MM/DD/YYYY)</i>
g. Type of application <i>(Check one)</i> New family                      Adding/changing family information                      Reapplication <i>(previously enrolled, not current)</i> Annual recertification                      Changing provider information <i>(attach new license and OPM Form 1644)</i>		
h. Is any other form of State, County or Local subsidy being received for the child(ren)?  Yes <i>(If "Yes", complete i. and j.)</i>  No	i. Source of subsidy	
	j. Amount of subsidy	
k. Address of provider <i>(Include street number, city, state and ZIP code)</i>	l. Telephone number of child care provider	
	m. Type of care <i>(Check one)</i>	Center-based care Family home-based care

**Section II - Child Information (Continued)**

2a. Name of second child	b. SSN of child	c. Date of birth (MM/DD/YYYY)
d. Name of child care provider	e. Weekly child care cost	f. Date of enrollment (MM/DD/YYYY)
g. Type of application ( <i>Check one</i> ) New family                      Adding/changing family information                      Reapplication ( <i>previously enrolled, not current</i> ) Annual recertification                      Changing provider information ( <i>attach new license and OPM Form 1644</i> )		
h. Is any other form of State, County or Local subsidy being received for the child(ren)?  Yes ( <i>If "Yes", complete i. and j.</i> )  No	i. Source of subsidy	
	j. Amount of subsidy	
k. Address of provider ( <i>Include street number, city, state and ZIP code</i> )	l. Telephone number of child care provider	
	m. Type of care ( <i>Check one</i> )	Center-based care Family home-based care
3a. Name of third child	b. SSN of child	c. Date of birth (MM/DD/YYYY)
d. Name of child care provider	e. Weekly child care cost	f. Date of enrollment (MM/DD/YYYY)
g. Type of application ( <i>Check one</i> ) New family                      Adding/changing family information                      Reapplication ( <i>previously enrolled, not current</i> ) Annual recertification                      Changing provider information ( <i>attach new license and OPM Form 1644</i> )		
h. Is any other form of State, County or Local subsidy being received for the child(ren)?  Yes ( <i>If "Yes", complete i. and j.</i> )  No	i. Source of subsidy	
	j. Amount of subsidy	
k. Address of provider ( <i>Include street number, city, state and ZIP code</i> )	l. Telephone number of child care provider	
	m. Type of care ( <i>Check one</i> )	Center-based care Family home-based care

**Section III - Signature of Parent / Legal Guardian**

I understand that it is a Federal crime under United States Code 18, Section 1001, to make a false statement on this form. If I make a false statement, I agree to be subject to criminal prosecution and punishment including a fine, imprisonment, or both. In addition, I may be subject to administrative punishment, including the termination of my federal employment.

I certify that the above information is true and correct to the best of my knowledge.

\_\_\_\_\_ Signature \_\_\_\_\_ Date of signature (MM/DD/YYYY) \_\_\_\_\_

**Privacy Act Statement**  
 Public Law 107-67, § 630 (September, 2001) confers regulatory authority on OPM for agency use of appropriated funds for child care costs for lower income Federal employees. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a Social Security Number or tax identification number. This is an amendment to title 31, Section 7701. The primary use of these Social Security Numbers will be for identification purposes in determining eligibility for child care subsidy. The primary use of information regarding family income (copies of pay slips and tax returns), name of current child care provider, copies of the provider's license, statement of compliance, and information about other child care subsidies is also used to determine eligibility for child care subsidy. Disclosure of the above information is voluntary, but failure to provide all of the requested information may result in denial of your application.



## U.S. Coast Guard Child Care Subsidy Application Addendum

Printed Name of Qualifying Member: \_\_\_\_\_

I) Status of member: (Please check all that apply)

\_\_\_\_ Activated/Deployed U.S. Coast Guard Service Member

\_\_\_\_ Reserve Member called to Active Duty (Minimum 180 days or longer)

\_\_\_\_ Married

\_\_\_\_ Single

\_\_\_\_ Divorced

\_\_\_\_ Separated

\_\_\_\_ Other, please specify \_\_\_\_\_

Provide information confirming status, for example:

Orders, Divorce Decree, BAH/Dependency Data Sheet, or other legal document(s).

II) Number of hours that the spouse/significant other works: \_\_\_\_\_  
(\*Minimum of 20 hours per week)

III) Number of credit hours that the spouse/partner attends school to include attending a community college, university, technical school or on-line classes:

Graduate \_\_\_\_\_

Undergraduate \_\_\_\_\_

(\*A minimum number of 6 credit hours must be met in order to qualify for benefits)

**\*Any combination of work and school may also be permitted**



## U.S. Coast Guard Child Care Subsidy Application Addendum

IV) Does the child/children for whom you are applying for benefits reside in the home with you?  
\_\_\_\_\_Yes      \_\_\_\_\_No If no, please provide an explanation and location

where the child/children reside:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

V) Schedule of Care Needed:

Number of hours of enrollment:

Week #1 \_\_\_\_\_

Week #2 \_\_\_\_\_

Week #3 \_\_\_\_\_

Week #4 \_\_\_\_\_

Additional days and/or hours:

\_\_\_\_\_  
\_\_\_\_\_

Parents who misrepresent information used to calculate Child Care Subsidy Benefits may have their benefit terminated and be subject to the Uniform Code of Military Justice (UCMJ) or other legal consequences.

\_\_\_\_\_  
*Qualifying USCG Member Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name of Qualifying Member*



## U.S. Coast Guard Child Care Subsidy Program Certification of Higher Education

The U.S. Coast Guard requires that the spouse/partner of the qualifying U.S. Coast Guard Member be attending school full time in order to qualify for benefits under the U.S. Coast Guard Child Care Subsidy Program. For Member's whose spouse/partner is a student, this form must be completed and returned to the GSA in order to determine your eligibility to receive benefits under the USCG Child Care Subsidy Program.

*This form must be completed and returned to the GSA in addition to the student's school schedule and/or enrollment information*

Student's Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Graduate: \_\_\_\_\_ Undergraduate: \_\_\_\_\_

Start Date: \_\_\_\_\_

Semester End Date: \_\_\_\_\_

Student's expected enrollment: Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_

Child Care needed: \_\_\_\_\_ Part Time \_\_\_\_\_ Full Time

I will notify The General Services Administration (GSA) at (866) 508-0371 to report change in my Spouse/Partner's attendance.

I understand that each time my spouse/partner receives an updated school schedule and/or enrollment information, that I must provide a copy of the document to the GSA in order to validate my continued eligibility in the U.S. Coast Guard Child Care Subsidy Program.

I further understand that my Child Care Subsidy benefit will be discontinued if my spouse/partner does not maintain full time enrollment as stated above.

Misrepresentation or falsifying this information may subject the individual to prosecution under the Uniform Code of Military Justice (UCMJ) and/or applicable State and Federal Laws.

\_\_\_\_\_  
*Signature of qualifying USCG Member*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed name of USCG Member*

\_\_\_\_\_  
*Spouse/Partner's Signature*

\_\_\_\_\_  
*Date*



## Certification for Spouse/Partner who is Seeking Employment or will be Enrolling in School

The U.S. Coast Guard Fee Assistance for child care is authorized for up to 90 business days to allow a spouse/partner to look for employment or enroll in school. This Certification Statement must be completed and signed by the member and their spouse/partner in order to qualify for, or continue to qualify for, fee assistance.

### Certification Statement

I \_\_\_\_\_ certify that  
*Printed name of qualifying USCG Member*

\_\_\_\_\_ is currently seeking employment or will be enrolling  
*Printed spouse/partner's name*

in school. Mark below, as applicable.

\_\_\_\_\_ My child/children is/are currently enrolled in full time care

\_\_\_\_\_ My child/children is/are currently enrolled in part time care

\_\_\_\_\_ My child/children will be enrolled in full time care

\_\_\_\_\_ My child/children will be enrolled in part time care

\_\_\_\_\_ I will not need child care for my child/children during this period and my

child/children's last day of attendance will be \_\_\_\_\_  
*Enter final date that child care benefits are to be paid*

I will notify the General Services Administration (GSA) at (866) 508-0371 to report the start date of employment and/or school enrollment date. I will provide a copy of pay stubs or student school schedule to the GSA to ensure that the number of hours worked or enrolled in school meets the minimum requirement as set forth by the U.S. Coast Guard.

I understand that after 90 business days my fee assistance will be discontinued if my spouse/partner does not find employment or enroll in school and provide required pay documents or a valid student school schedule to the GSA.

Misrepresentation or falsifying this information may subject the individual to prosecution under the Uniform Code of Military Justice (UCMJ) and/or applicable State and Federal Laws.

\_\_\_\_\_  
*Signature of qualifying USCG Member*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Spouse/Partner's Signature*

\_\_\_\_\_  
*Date*

**Note to applicants: The U.S. Coast Guard Child Care Subsidy Benefit is retroactive from the date your application is received at the GSA pending receipt of all required documents. If supporting documents are not received within 30 business days of application, a new application will need to be filed in order to establish a new child care subsidy benefit start date.**

