Child Care Access Means Parents In School (CCAMPIS)
Program Application

ACC ARAPAHOE COMMUNITY COLLEGE

The CCAMPIS program is a federally funded initiative to help student-parents complete their education. The Child Development Center at Arapahoe Community College was awarded a CCAMPIS grant to provide subsidized care to the children of students that are eligible. The Child Development Center at ACC offers full day care for 2, 3, 4,or 5 days per week to children ages 12 mos – 5 years. For more information about the Child Development Center at ACC please visit arapahoe.edu/campus-community/child-care

Completing this application **DOES NOT** guarantee funding or enrollment

☐New CCAMPIS Applicant ☐Returning CCAMPIS Applicant

Applicant Information				
Last Name	First Name	Middle Initial	S#	Semester Applying for (ex. Spring 2024)
Address 🖃				
City	State	Zip	County	
Phone☏		ACC Student Email Address		

Gender
o Female
o Male
	Date of Birth (month/day/year)		Citizenship
			    o US Citizen
			    o Permanent Resident
			    o Neither	

Ethnic Affiliation (check all that apply)	☐Hispanic ☐Black or African-American ☐ White, non-Hispanic ☐ American Indian or Alaska Native ☐ Asian ☐ Native Hawaiian or other Pacific Islander ☐ Two or more races			
Single Parent ☐ YES ☐ NO	Military Status ☐ YES ☐ NO Please check **YES** if the child for which you are requesting care has a parent/guardian on active duty in the uniformed services (as defined by 37 U.S.C. 101, in the Army, Navy, Air Force, Marine Corps, Coast Guard, National Guard, or the reserve component of any of the aforementioned services)			

RETURN COMPLETED APPLICATION TO The Child Development Center

Child Care Access Means Parents In School (CCAMPIS)
Program Application

Childcare Information					
Name of Child for which care is being requested	Last Name	First Name	Middle Initial	Date of Birth	Gender
Child 1 ⇨					
Child 2 ⇨					
Days of Care Requested (check all that apply) Care is offered Mon-Fri 7:30 a.m. - 5:30 p.m.	Monday	Tuesday	Wednesday	Thursday	Friday
Child 1 ⇨					
Child 2 ⇨					

Academic Information			
First Generation College Student? (neither parent holds a bachelor's degree or higher) ☐ YES ☐ NO	Is this your first degree? ☐ YES ☐ NO If no, what degree do you hold?_____		
How many credit hours do you plan to complete during the semester for which you are applying for CCAMPIS? ☐ 6 ☐ 9-11 ☐ 12 or more	What is your primary area of study?	What is your educational goal? ☐ AA, AS, AAS, AGS ☐ Certificate ☐ Earn credits to transfer	Which semester/year do you plan to complete your educational goal? Semester ☐ Fall ☐ Spring ☐ Summer Year _____
How do you plan to use your degree? Current GPA _____			

RETURN COMPLETED APPLICATION TO The Child Development Center

Child Care Access Means Parents In School (CCAMPIS)
Program Application

How did you hear about the CCAMPIS program? (check all that apply)

☐ Another Student ☐ Visit to the Child Development Center ☐ Flyer/poster on campus

☐ ACC Website ☐ Faculty/Staff member ☐ Childcare Innovations

☐ All campus email ☐ Other _____

Participant Agreement

PLEASE INTITIAL THAT YOU HAVE READ, UNDERSTAND, AND AGREE TO THE FOLLOWING IF YOU ARE ACCEPTED INTO THE PROGRAM:

Initial	
	Maintain a minimum course load of 6-credit hours per semester (fall/spring/summer).
	Meet at least once each semester with the CCAMPIS Navigator to discuss plans for a successful semester.
	Maintain good academic standing (67% completion of credits attempted, 2.0 GPA or higher).
	Complete FAFSA in a timely manner each year.
	Child will need to attend at least 80% of the month.
	Participate in parent education/engagement activities through the Children's Center.
	Notify the CDC Assistant Director of any change in enrollment status.
	If my course load decreases mid-month my subsidy will be reduced for the full month.
	Not receiving a child care subsidy from another local, state or federal program.
	Meet with Children's Center staff at least once per semester to discuss enrollment as well as payment responsibilities between semesters.
	I understand that my child's spot is reserved for students with CCAMPIS eligibility and if I become ineligible for any reason, I may need to make different arrangements for child care.
	Request for a change in my child's schedule must be made in writing at least one month in advance.

Next Steps

RETURN COMPLETED APPLICATION TO The Child Development Center

Child Care Access Means Parents In School (CCAMPIS)
Program Application

ACC
ARAPAHOE COMMUNITY COLLEGE

Your application will be reviewed by the Child Development Center and evaluated based on need and academic merit. **Enrollment of your child will depend on space available in the Child Development Center.** Preference for enrollment will be given to student-parents enrolled in 12 or more credit hours at ACC. If you have any questions regarding this application or your status, please contact the Child Development Center 303-797-5678 or by email little.learners@arapahoe.edu.

By signing below, I confirm that the information I have provided to determine my eligibility to receive funding through the Arapahoe Community College CCAMPIS program is accurate. I understand that providing false information will result in repayment of money for services which I am not entitled.

Student's Signature _____ Date _____

PLEASE ATTACH:

☐ Unofficial Transcript   ☐ Class Schedule

☐ Typed statement describing your academic and professional goals (300 word max).

☐ Typed statement detailing how financing childcare has been a barrier to your educational goals (300 word max).

If you are a returning CCAMPIS student we do not need the typed statements.

RETURN COMPLETED APPLICATION TO The Child Development Center

Child Care Access Means Parents In School (CCAMPIS)
Program Application

ACC ARAPAHOE COMMUNITY COLLEGE

CHILD CARE ACCESS MEANS PARENTS IN SCHOOL

PLEASE PRINT			
Last Name		First Name	
S #		Birth Date	

**** STOP! BELOW TO BE COMPLETED BY FINANCIAL AID DEPARTMENT ****

Dear ACC Financial Aid Officer:

The above student has applied for the CCAMPIS program to receive child care assistance for SP '24 semester. Please complete the financial information below to assist with determining eligibility. Thank you in advance for your prompt cooperation.

Anticipated credit hours:	Fall Term		Spring Term		Summer Term	
Student is eligible for Federal Pell Grant:		YES: Indicate Annual Amount: $			NO	
Student's **total cost of attendance** for academic year:		Student's **unmet need** for academic year:				
$		$				
Academic Standing:		Degree Seeking:				
FA Officer Initials:		Ext.		Date:		

Financial AID VERIFICATION FORM

RETURN COMPLETED APPLICATION TO The Child Development Center