



# Scholarship Application

We recommend you look into Colorado's Child Care Assistance Program (CCAP) as a starting point. You can check out our website (ChildrensPlayland.org) to get a general idea if your household income is within the limits for your family size to qualify or if you were denied CCAP, please complete this application and we will see what type of discount we may be able to offer.

\*\*\*\* Discount is not guaranteed. \*\*\*\*

Please complete the following and return along with copies of at least one form of income verification for all current income sources such as:

- Latest Paystubs for the most recent pay periods
- Latest W2(s)

Have you applied for CCAP: ☐ Yes ☐ No (check one)

If yes, when: \_\_\_\_\_ (date of application)

Caseworker Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Were you denied? ☐ Yes ☐ No (check one)

If yes, what was their reason for denial: \_\_\_\_\_  
\_\_\_\_\_

## Parent Information

	Parent 1	Parent 2
First and Last Name:		
Phone Number:		
Address:		



## Children's Playland

Child Care and Preschool for children 6 weeks to 6 years

1555 S Havana St, Unit Q, Aurora, CO 80012

303-337-1112 - ChildrensPlayland.org - info@childrensplayland.org



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## Employment Information

	Parent 1	Parent 2
Employer 1:		
Position/Title:		
Supervisor Name:		
Supervisor Phone:		
Income:		
Income is per: (circle one)	week, month, year	week, month, year

	Parent 1	Parent 2
Employer 2:		
Position/Title:		
Supervisor Name:		
Supervisor Phone:		
Income:		
Income is per: (circle one)	week, month, year	week, month, year



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## Child Information

Please list all children in the household as it helps us make recommendations on other potential child care assistance by knowing your total household size and income. For those children you are looking for care, please list the days and times of the week you're looking for care. E.g. M-F 6:30a to 5p, etc.

	Name	Age	Looking for Child Care / Preschool At Our Center? What Days/Times?
Child 1:			
Child 2:			
Child 3:			
Child 4:			
Child 5:			

I certify that the information I've provided is true and accurate to the best of my knowledge and I provide authorization for my employer to provide Children's Playland with my income information.

Parent 1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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