

# Stanford University



## Junior Faculty Child Care Assistance Program (JFCCAP) Information & Application

The Junior Faculty Child Care Assistance Program provides a salary supplement to eligible junior faculty to offset qualified child care expenses for children 5 years and younger. Untenured assistant and untenured associate professors in the tenure line, and Medical Center line and non-tenure line faculty who do not have continuing appointments are eligible. Award levels are based on adjusted gross family income and range from \$5,000 to \$20,000. The JFCCAP awards are disbursed through a reimbursement process and are taxable income.

### I. Eligibility Requirements

#### A. Faculty status:

- Full-time junior faculty i.e., assistant and associate professors in the tenure-line, the non-tenure line, or the Medical Center line who are not in “acting” status and who have not received tenure or been promoted to continuing term. Clinician educators and adjunct professors are not eligible for this program.
- Eligibility for the Junior Faculty Child Care Assistance Program ceases upon promotion to tenure or continuing term. Reimbursement for care will be continued through the end of the fiscal year in which tenure/continuing term was achieved.

#### B. Spouse/Same Sex Domestic Partner must be:

- Employed at least 75% FTE (30 hours/week), *or*
- A full-time student, *or*
- Disabled and unable to work or care for the child, *or*
- Spouse/partner of a new faculty member (i.e., one who is in the first six months of his/her faculty position) who is looking for employment .

#### C. Child(ren) must be:

- Legal dependent(s) verified by faculty’s tax return and whose child care costs are the faculty member’s responsibility.
- Five years old or younger as of September 1 (i.e., born on or after September 1, 2006).

#### D. Type of Childcare

Any type of care (center, nanny, etc.) qualifies for reimbursement as long as it is:

- Provided by a person or organization. Submission of a SSN or TIN is required.
- Not the employee's legal dependent who is providing care.
- Provided by a person who is being paid for taking care of your dependent child as documented by receipts.

#### E. Income Requirements

- Total adjusted gross family income may not exceed \$174,999 per year, including any child support payments.
- Financial eligibility is verified by submitting appropriate tax, wage, and child support payment documentation (a copy of prior year's tax return(s), pay stubs reflecting current income, and a statement of child support payments).

#### F. Regular Confirmation of Eligibility

- Faculty are required to confirm their continuing eligibility (in terms of spouse/partner employment status, non-promotion to tenure or continuing term, etc.) on each reimbursement request form they submit.
- Faculty awarded tenure/continuing term will be reimbursed for childcare expenses for the remainder of the fiscal year in which the award was made.
- Faculty become ineligible if their spouse/domestic partner does not meet the employment requirement after the initial six-month period.

## II. Award Level

- Award levels are based on family adjusted gross income as determined by prior year's taxes, current earnings statements, including any child support payments, and the age and number of eligible children.
- Awards for one child age 5 and under range from \$5,000 - \$20,000 (see table below).
- Faculty who have additional children age 0-5 years as of Sept. 1, 2011, receive an additional supplement of \$1,000 total.
- For faculty who are eligible for the Child Care Subsidy Grant program (i.e., adjusted gross family income <\$125,000), application to that program is required. The amount of the Junior Faculty Child Care Assistance Program award will be adjusted to reflect the CCSG award. (see: [http://worklife.stanford.edu/child\\_grant.html](http://worklife.stanford.edu/child_grant.html))
- Stanford allows one CCSG and one JFCCAP grant per family, per year.

### Junior Faculty Child Care Assistance Program – Award Ranges

<b>Adjusted Family Gross Income</b>	<b>Award</b>
<\$109,999	\$20,000
\$110,000 - \$129,999	\$15,000
\$130,000 - \$149,999	\$10,000
\$150,000 - \$174,999	\$ 5,000

### III. Application periods

- Current and continuing faculty **must** apply by the August 20 deadline (see table below).
- Applications will be accepted after October 1, 2011, only from those faculty newly hired or newly eligible (i.e., since the previous deadline), or to amend existing awards (e.g., for additional children). Awards made other than at the beginning of the fiscal year will be prorated to the nearest subsequent month.
- **Applications must be submitted annually** for grants that apply to the fiscal year (Sept. 1 – Aug 31). **Awards are not automatically renewed.**
- Applications must be submitted through US mail only.

#### Junior Faculty Child Care Assistance Program – Application Periods

Period	Application Due	Effective Period/% Award	Who Should Apply
A	August 19, 2011	Sept. 1, 2011 - Aug. 31, 2012 (full year, 100% award)	<b>All</b> currently eligible faculty
B	October 1, 2011	Sept. 1, 2011 - Aug. 31, 2012 (full year, 100% award)	<b><u>Only newly eligible faculty</u></b> : e.g., new hires since the previous deadline, <b>or</b> faculty with new children or amendments <b>or</b> faculty not eligible in a prior application period.
C	Ongoing basis beginning Oct. 2, 2011, and thereafter	Award, if granted, will begin first of month <u>after</u> application submitted & be prorated for remainder of fiscal year. (Example: awarded 11/18/2011, will be a 9-month grant covering 12/1/2011 through 8/31/2012.)	

- Reimbursement requests are processed six (6) times per year only (see table below). The reimbursement request form can be downloaded from <http://worklife.stanford.edu>.
- Reimbursements are paid based on receipts from child care provider(s) submitted with the reimbursement form.
- Reimbursement requests may be mailed, ID mailed, hand-delivered, faxed, or scanned/emailed. *A current date and signature is required for each request.*
- Reimbursement awards are issued in a separate payment on standard university pay dates, and are *taxed as income*. No benefit or optional deductions (e.g. life insurance, retirement plan, etc.) will be deducted from reimbursement payments.

#### Junior Faculty Child Care Assistance Program – Reimbursement Schedule

Reimbursement requests RECEIVED by	Awards will be paid
October 31	November 22
December 16/last day prior to winter close	January 22
February 28	March 22
April 30	May 22
June 30	July 22
August 31	September 22

# Stanford University

## Junior Faculty Child Care Assistance Program



### Application FY 2011 - 2012

You may apply **only** in the application period in which you meet the eligibility requirement.

*I am applying for the following deadline:*

- A - August 19, 2011**     
  **B - October 1, 2011**     
  **C – Other** \_\_\_\_\_  
(Date submitted)

My spouse/ registered domestic partner is:

- Employed at least 75% FTE (30 hours/week), *or*
- A full-time student, *or*
- Disabled and unable to work or care for a child *or*
- Looking for employment.

#### **PART ONE: YOUR INFORMATION**

Read the official brochure of Stanford's Junior Faculty Child Care Assistance Program.  
Complete form in blue or black ink. **Please print clearly.**

FACULTY NAME (LAST, FIRST, MIDDLE INITIAL)	DATE OF FACULTY APPOINTMENT
HOME STREET ADDRESS	
CITY, STATE, ZIP	STANFORD EMPLOYEE ID
E-MAIL ADDRESS	WORK PHONE
DEPARTMENT	CAMPUS ID MAIL ADDRESS
MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> REGISTERED DOMESTIC PARTNER RELATIONSHIP	HOME PHONE
NAME OF SPOUSE/REGISTERED DOMESTIC PARTNER (LAST, FIRST, MIDDLE INITIAL)	NAME OF SPOUSE/REGISTERED DOMESTIC PARTNER'S EMPLOYER
IS YOUR SPOUSE/REGISTERED DOMESTIC PARTNER A FULL-TIME STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHERE?

## PART TWO: ELIGIBLE CHILDREN

Information about your dependent child(ren) age 5 and under:

NAME ( LAST, FIRST, MIDDLE INITIAL)	BIRTHDATE (MM/DD/YYYY)	TAX DEPENDENT <input type="checkbox"/> YES <input type="checkbox"/> NO	LAST 4 DIGITS OF SOC. SEC. NO.
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	

**Complete, date and sign below.**

## PART THREE: FINANCIAL INFORMATION

In order to determine award amounts, the following documentation is required with your application. Check off each item as you enclose it with your application:

- Copies of your most current pay stubs from **two** pay periods (or offer letter for new employees)
- Copies of spouse/registered domestic partner pay stubs from **two** pay periods or similar information
- A completed, signed copy of your 2010 federal income tax form 1040 or 1040A (front and back), and one for your spouse/domestic partner, **if** you file taxes separately
- A copy of IRS Schedule C, **if** you or your spouse/registered domestic partner has self-employment income.

Please indicate if you receive Child Support or not:  I receive child support  I do not receive child support

If you receive Child Support, please list annual amount for: **2010** \_\_\_\_\_ **2011** \_\_\_\_\_

## READ AND SIGN

**Statement of Understanding** — By signing below, I certify that I have attached all applicable tax forms and other income source documents including pay stubs. I understand I must notify the WorkLife Office of any family status changes (i.e. dissolution of marriage or domestic partnership) which could affect my child custody responsibilities during the plan year I receive a Junior Faculty Child Care Assistance Program award. I certify under penalty of perjury that all statements and documentation relating to this application are true. I understand that incomplete or inaccurate information may adversely affect my child(ren)'s eligibility under this Program up to and including repayment to Stanford University of any funds awarded and/or may result in disciplinary action up to and including termination.

Employee Signature

Date

Return this application and all required supporting documentation to:

WorkLife Office  
JFCCAP Applications  
P.O. Box 20554  
Stanford, CA 94309

### Special Notes:

- You may need extra postage.
- Include a self-addressed stamped envelope **if you want notification** that we received your application.
- The WorkLife Office **does not** accept applications by fax, ID mail, or email.

*Questions about completing this form? Call the WorkLife Office at (650) 723-2660*