

# UO Moss Street Children's Center

## Academic Year 2020-21 Child Care Application

Scheduling for Sept 21<sup>st</sup>, 2020 – Summer 2021



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### First Parent (or guardian):

Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ UO ID # \_\_\_\_\_

**As of fall term 2020, I will be considered a:** *this information is used to determine eligibility and rates charged*

UO Student\*:     Undergrad     Grad     Law     AEI     CEP

Fulltime or  Part time Dept/Major: \_\_\_\_\_

University Employee:     Faculty  Staff    Dept/Prog: \_\_\_\_\_

### Second Parent (or guardian):

Not Applicable

Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell # \_\_\_\_\_ Home # \_\_\_\_\_ UO ID # \_\_\_\_\_

**As of fall term 2020, I will be considered a:** *this information is used to determine eligibility and rates charged*

UO Student\*:     Undergrad     Grad     Law     AEI     CEP

Fulltime or  Part time Dept/Major: \_\_\_\_\_

University Employee:     Faculty  Staff    Dept/Prog: \_\_\_\_\_

Non-University Parent

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**Do You Receive:**    ASUO Subsidy?

Yes     No

If so, what Percent? \_\_\_\_\_

DHS/ERDC?

Yes     No

Name of Case Worker: \_\_\_\_\_

International Students:    Country \_\_\_\_\_ Do you need a translator? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

\*A UO student at Moss Street is someone who is seeking a degree, taking credits and paying incidental fees.

## Scheduling

### Confirmations for the start of the new academic year:

UO Student families by June 30th; UO Employee families by July 15th.

Then, ongoing confirmations as space becomes available.

The initial schedule you are confirmed for, to start care at Moss Street, will be your schedule throughout the rest of the academic year (Fall/Winter/Spring/Summer). Thus, we encourage you to ask for all the hours you may possibly need now, up front, so that you are covered for the subsequent term(s). You will, however, be able to request a schedule change for each up-coming term.

This schedule will be in effect for the entire academic year, which runs  
Sept 21<sup>st</sup> , 2019 thru Summer 2020.

Please see our academic calendar for Center closure dates.

**Return application to:**  
**1685 Moss St, Eugene OR 97403**  
**Phone # 541-346-4384**  
**Fax # 541-346-0656**  
**Email: [mssc@uoregon.edu](mailto:mssc@uoregon.edu)**

Applications are accepted through-out the academic year, and will be placed on the waiting list once we are full. Preference, within each of our priority groups, will be given in the order that the applications were received. Any time space becomes available during the academic year, we will make offers based on our established priorities of:

UO student families first (returning then new), UO faculty/staff families next (returning then new).

Our waiting list is fluid, with no traditional number assigned to an application. Meaning that as long as there is a submitted application from a higher priority group, we will offer to that family first.

Block scheduling options by age group:

03-12 mos (pre-mobile): 7:30-3:00, 7:30-12:30

12 mos (post-mobile) thru 5 years (not yet in Kinder): 7:30-5:45, 7:30-3:00, 7:30-12:30; 12:45-5:45

Kindergarten - 3<sup>rd</sup> grade: Mon thru Fri, 2:45-5:45, and Fri, 1:30-5:45, early release schools

A two-day minimum is required for your child's weekly schedule.

You can choose different blocks of time for different days of the week.

Please note- you pay for all hours within each time block you choose.

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

We applied for the 2019-20 AY, but were placed on the waiting list.

**Please indicate your preferred schedule:**

03-12 months, pre-mobile:  
7:30-3:00 or 7:30-12:30

	IN time	OUT time	No Care
Monday	_____	_____	<input type="checkbox"/>
Tuesday	_____	_____	<input type="checkbox"/>
Wednesday	_____	_____	<input type="checkbox"/>
Thursday	_____	_____	<input type="checkbox"/>
Friday	_____	_____	<input type="checkbox"/>

12 months (post-mobile) - 5 years (not yet in Kinder):  
7:30-5:45, 7:30-3:00, 7:30-12:30 or 12:45-5:45

	IN time	OUT time	No Care
Monday	_____	_____	<input type="checkbox"/>
Tuesday	_____	_____	<input type="checkbox"/>
Wednesday	_____	_____	<input type="checkbox"/>
Thursday	_____	_____	<input type="checkbox"/>
Friday	_____	_____	<input type="checkbox"/>

After-school care for Kinders - 3<sup>rd</sup> graders:  
Mon – Fri 2:45-5:45; Fri 1:30-5:45, early release

Monday	<input type="checkbox"/> Need Care	<input type="checkbox"/> No Care	Grade: <input type="checkbox"/> K <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup> Elementary School attending: _____ Need transport? <input type="checkbox"/> Yes <input type="checkbox"/> No
Tuesday	<input type="checkbox"/> Need Care	<input type="checkbox"/> No Care	
Wednesday	<input type="checkbox"/> Need Care	<input type="checkbox"/> No Care	
Thursday	<input type="checkbox"/> Need Care	<input type="checkbox"/> No Care	
Friday	<input type="checkbox"/> Need Care	<input type="checkbox"/> No Care	

I understand that if space is available and I accept it, I will be **financially responsible** for the schedule I requested within this application. I will still have the opportunity to request a change by submitting a written request by the specific schedule change deadline for each term.

**PARENT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**NEW PARENT NOTE:** Completed Enrollment Forms are needed for all children to start care. Also, an orientation visit and a \$75.00 confirmation deposit are pre-requisites to starting care; these items are needed only once a schedule is confirmed for your child.

For complete withdrawal, a 30-day written notice is required.

School-age notes:

About 4j district-wide NO-school days:

Children who are usually scheduled for after-school care on the same day of the week that a 4j no-school day occurs will automatically be signed-up for all-day care for that date.

An email, closer to each date will be sent out as a reminder.

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About after-school transportation, to Moss Street:

Our neighborhood school is Edison Elementary, for which the 4j school district provides the bus transportation to Moss Street (we are usually their first stop). Parents must get on the Edison bus roster before your child can ride the 4j school bus to Moss Street, and you do so by contacting the Edison Elem. office, directly.

Transportation from some other, nearby area schools is possible. Moss Street provides this in cooperation with the Vivian Olum Child Development Center, another campus-based provider. Which schools we provide transportation from may vary from year to year, and is based on demand, location and driving routes/times.

PLEASE COMPLETE THE PART OF THIS FORM (A or B) THAT MAY APPLY TO YOUR FAMILY

**A**

**O**

**MOSS STREET CHILDREN'S CENTER  
UO Student, Staff and Faculty Parents  
AFFIDAVIT OF MARRIAGE**

We, the undersigned, declare that we are legally married to each other and if requested, would be able to provide proof of our marriage.

We certify under penalty of perjury under the laws of the State of Oregon, that the foregoing is true and accurate to the best of our knowledge.

\_\_\_\_\_  
Parent Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Partner Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*Note:** This affidavit is used for prioritization of access to services at Moss Street and is not related to other UO services or benefits.

**B**

**O**

**MOSS STREET CHILDREN'S CENTER  
UO Student, Staff and Faculty Parents  
AFFIDAVIT OF DOMESTIC PARTNERSHIP**

We, the undersigned, declare that we are domestic partners, and that we:

- 1) Are each eighteen (18) years of age or older;
- 2) Share a close personal relationship and are responsible for each other's common welfare;
- 3) Are each other's sole domestic partner;
- 4) Are not married to anyone nor have had another domestic partner within the prior six months;
- 5) Are not related by blood closer than would bar marriage in the State of Oregon;
- 6) Have jointly shared the same regular and permanent residence for at least six (6) months immediately preceding the date of this affidavit with the intent to continue doing so indefinitely;
- 7) Are jointly financially responsible for basic living expenses defined as the cost of food, shelter, and any other expenses of maintain a household. Domestic partners need not contribute equally or jointly to the cost of these expenses as long as they agree that both are responsible for the cost.

If requested, we would be able to provide at least two of the following as verification of our joint responsibility (information should be dated to confirm eligibility at time of application):

- a) Joint mortgage, lease or rental agreement.
- b) Designation of the domestic partner as primary beneficiary for a life insurance or retirement contract.
- c) Designation of the domestic partner as primary beneficiary in the employee/student's will.
- d) Durable power of attorney for health care or financial management.
- e) Joint ownership of a motor vehicle, a joint bank account, or joint credit account.
- f) A relationship or cohabitation contract which obligates each of the parties to provide support for the other party.

We certify under penalty of perjury under the laws of the State of Oregon, that the foregoing is true and accurate to the best of our knowledge.

\_\_\_\_\_  
Employee/Student Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Partner Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*Note:** This affidavit is used for prioritization of access to services at Moss Street and is not related to other UO services or benefits.