



# FAMILY INDEPENDENCE ADMINISTRATION

Seth W. Diamond, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner  
Policy, Procedures and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner  
Office of Procedures

## POLICY DIRECTIVE #04-15-EMP

*(This Policy Directive Replaces PD #03-23-EMP)*

### SUMMER CHILD CARE 2004

|                              |                                   |
|------------------------------|-----------------------------------|
| <b>Date:</b><br>May 24, 2004 | <b>Subtopic(s):</b><br>Child Care |
|------------------------------|-----------------------------------|

#### AUDIENCE

The instructions in this policy directive are for the JOS/Workers in the Job Centers who process child care and informational for all others.

#### REVISIONS TO ORIGINAL DIRECTIVE

The policy directive has been revised to reflect the following changes:

- The official start of summer vacation for school-age children is Monday, June 28, 2004.
- The "Summer In The City" program has been merged with the Human Resources Administration (HRA)'s regular summer child care.
- The enrollment process for Summer Day and Country Sleep-Away camps will be handled at a central location.
- A Summer Automated Child Care Eligibility & Enrollment Project (ACEE) will involve 41 camps.
- The change in the Summer Camp Program 2003 Child Enrollment Form (**W-274E**) title and the creation of a Spanish version.

#### POLICY

Child care for the summer months must be in place for all school-age children to ensure that parents/guardians on public assistance will be able to continue in work-related activities.

HAVE QUESTIONS ABOUT THIS PROCEDURE?  
Call 718-557-1313 then press 2 at the prompt followed by 765 or  
send an e-mail to *FIA Call Center*

**BACKGROUND**

The official start of summer vacation for school-age children is Monday, June 28, 2004. The Office of Child Care (OCC) offers the following summer child care programs:

- Child Care for Parents/Guardians in Work Related Activities Program  
Parents/guardian have the option of remaining with the current school year provider, or enrolling the child with a temporary summer child care provider or in a summer camp.
- Summer Day and Country Sleep-Away Camp Program  
This program is open to any child active on a public assistance (PA) case. Parents/guardians do not have to be in a work-related activity.

OCC also runs the Summer Automated Child Care Eligibility & Enrollment (ACEE) Project, which allows the parent/guardian to take care of the eligibility and enrollment process at the camp site.

Beginning in the third week of April OCC mailed the Summer 2004 Parent Planning Letter (**EXP-77P**), the revised Plan for Summer Vacation (**W-273WW**) flyer, the Department of Health and Mental Hygiene (DOHMH) Summer Camp 2004 listings and the Summer Country Camp listing for 2004 to parents/guardians. The purpose of the mailing was to remind parents/guardians of the need to plan for the summer vacation and inform them of options for summer child care.

**REQUIRED ACTION**

---

Child Care for Parents/Guardians Engaged in a Work-Related Activity

Parents/guardians engaged in a work-related activity have the option of keeping the child with the current school year provider, enrolling the child with a temporary summer child care provider or enrolling the child into a summer camp.

A) Remaining with School Year Provider

School Year Provider

If the parent/guardian chooses to remain with the current school year provider, no forms need to be submitted. Providers caring for the child more than six hours per day must indicate this in the "FT Days" column on the **HRA1**. Providers utilizing the Child Care Automated Phone System (CAPS) must enter the number of full-time days in CAPS.

B) Temporary Summer Provider or Summer Camp

Temporary Summer Provider/Summer Camp

If the parents/guardian chooses to enroll the child in a summer camp or use a temporary summer provider, the School Break Child Care Provider Application and Voucher (**W-273PP**) form must be completed by both the parent/guardian and the camp or provider. The parent/guardian must return the **W-273PP** to the Job Center. Please note: this does not include enrollment in a Summer Day or Country Sleep-Away Camp. The enrollment process for those programs is described on page 5.

Parents/Guardians in WEP/Vendor Activities

For parents/guardians participating in approved work activities, the **W-273PP** will be available at the WEP/Vendor sites. If the parent/guardian is unable to bring the completed **W-273PP** to the Job Center the WEP Supervisor/Vendor must either mail or fax the **W-273PP** to the Child Care Services Unit to the attention of the School Break Liaison at 109 East 16th Street, 10th Floor, New York, NY 10003, (212) 835-7739.

Child will not return to current school year provider

If the parent/guardian indicates that the child will not return to the current school year provider, the parent/guardian must be referred to their Job Center to complete a new Child Care Provider Application and Voucher Form (**W-273B**).

For parents/guardians who bring the completed **W-273PP** to the Job Centers, the JOS/Worker must confirm with the parent/guardians that the children will return to the current school year provider when the school session resumes.

**Enrollment Process for Summer Camp/Temporary Providers**

Enrollment Process for Summer Camp or Temporary Summer Provider

Summer Camps and temporary providers must be enrolled in the Automated Child Care Information System (ACCIS). The JOS/Worker must follow the steps below to enroll a child with a summer camp or a temporary provider in ACCIS.

The JOS/Worker must begin the data entry process from the Child Maintenance Screen 2 of 2 in ACCIS:

Refer to PB #02-242-EMP

Terminate the Current Enrollment

1. Click **Modify** — **F4**
2. Type **25** (transfer to another program) in **TC** field
3. Type 06/25/04 in the **End Date** (or the last day of care)
4. Type 06/25/04 in the **Drop Date** (or the last day of care)

Enter the Summer School Break Enrollment

1. Enter enrollment information **Hrs, Loc, Provider/Program**
2. Type 06/28/04 in the **Start Date** (or the day care begins)
3. Type **31** (summer enrollment for voucher use only) in **TC** field
4. Type 09/10/04 in **End** date (or the day care will end)
5. Leave **Drop Date** blank
6. Click **Save** — **F7**

Enter Regular School Session Provider

1. Click **More** — **F10**
2. Click **Complete/Supplementary Enrollment** on menu
3. Click **Supp.** on the **Supp. Indicator box**
4. Click **Modify** — **F4** on the **Supplementary Enrollment** screen
5. Enter enrollment information **Hrs, Loc, Provider/Program**
6. Enter 09/10/04 in the **Start** date (date child will return to current provider)
7. Click **Save** — **F7** on the **Supplementary Enrollment** screen

**Summer Camp/Program Registration Fees**

Summer  
Camp/Program  
Registration Fees

Camps that charge a registration fee must forward documentation requesting the registration payment to Joyce Levy, Deputy Director of Child Care Support Services (CCSS), 109 East 16th Street, 10th Floor, New York, NY 10003 or fax the documentation to (212) 835-7749. The Voucher Payment Unit (VPU) will only process requests for registration fees (up to a maximum of \$50) for newly enrolled children who are on public assistance and whose parents/guardians are in compliance with engagement requirements.

Summer Day and  
Country Sleep-Away  
Camp

**Summer Day and Country Sleep-Away Camp Programs for Children on Public Assistance**

Refer to #02-119-OPE

Parents/guardians have the option of enrolling their child into a Summer Day Camp or Country Sleep-Away Camp, which is open to any child on public assistance. The parent/guardian does not have to be enrolled in a work-related activity for this program. The camps have agreed to accept a supplemental fee from HRA to offset the camp cost. Summer Day and Country Sleep-Away Camp programs are not eligible for registration fees. The process for enrolling children into Summer Day and Country Camps differs from the regular summer camp enrollment process as follows:

Summer Day and  
Country Sleep-Away  
Camp programs are not  
eligible for registration  
fees

Summer Day and  
Country Sleep-Away  
Camp Eligibility Criteria

The JOS/Worker or Child Care Liaison must go to the Welfare Management System (WMS), screen 22 (**NQCS01**) to ensure the child is active on the PA case and that the case type is:

- Family Assistance – case type **11**
- Safety Net Cash Assistance – case type **12**
- Safety Net Non-Cash – case type **16**; or
- Safety Net Federally Participating – case type **17**.

Summer Country Camps accept children from ages seven to 15 years. Summer Day Camps accept children through age 15.

The JOS/Worker or Child Care Liaison must ensure that the child meets the eligibility criteria for the Summer Day or Country Sleep-Away Camp program before a referral is given.

**Summer Day/Country Sleep-Away Camp Enrollment Process**

Summer Day/  
Country Sleep-Away  
Camp Enrollment  
Process

Parents/guardians and Camp Directors must complete the Expedited Summer Camp Program Child Enrollment Form (**W-274E**) at the campsite. The **W-274E** will be available at all of the campsites. The Camp Director or designee will fax the completed **W-274E** and the Camp Acceptance (**M-931**) form to 109 East 16th Street, 10th Floor, New York, NY 10003 to the attention of the Summer Day and Country Camp Coordinator at (212) 835-7739. JOS/Workers or Camp Directors who have any questions regarding the enrollment process can call (212) 835-8160 for information.

Please note: The Summer Day and Country Camp Coordinator at 16th Street will process the enrollment, temporarily terminating the school year provider in order to enroll the child into either a Summer Day or Country Sleep-Away camp.

Confirmation of  
Enrollment in Summer  
Day and Country Sleep-  
Away Camp

Camp Directors have been instructed by OCC to make a copy of the completed **W-274E** and give it to the parent/guardian. The copy of the **W-274E** is the parent’s/guardian’s proof that the child(ren) is enrolled in a Summer Day or Country Sleep-Away Camp.

Parents who bring  
**W-274E** to Job Center

If parents/guardians bring the completed **W-274E** to the Job Center, JOS/Workers must first make a copy of the **W-274E** and place in the case folder, then forward the original to the Job Center Child Care Liaison. The Liaison must ensure that the form is forwarded to the Summer Day and Country Camp Coordinator at 109 East 16th Street, 10th Floor.

**Summer Automated Child Care Eligibility & Enrollment (ACEE) Project**

Summer Automated Child Care Eligibility & Enrollment (ACEE) Project

Beginning on June 1, 2004, an automated eligibility and enrollment process will be available to 41 summer camps (includes regular camps, Summer Day and Country Sleep-Away camps). The camps selected had enrollments of 26 or more children during the summer of 2003.

The names of the camps participating in the ACEE project will be listed in the June 1st ACCIS Bulletin.

The parent/guardian must complete the Summer Automated Child Care Eligibility and Enrollment (ACEE) (**W-274N**) form at the campsite. The camp will submit the enrollment information via the Internet for automated eligibility determination and enrollment of the eligible child. Note: If the camp is a Summer Day/Country Sleep-Away participating camp, the **W-274N** will be submitted instead of the **W-274E**.

Confirmation of Enrollment in the ACEE Project

OCC has instructed all Camp Directors to make a copy of the completed **W-274N** and give it to the parent/guardian as confirmation of enrollment of the child(ren) in the camp.

If a parent/guardian reports to the Job Center with an original completed **W-274N** and the camp is one of those listed as part of the ACEE project, JOS/Workers must make a copy of the **W-274N** and then refer the parent/guardian to the Child Care Liaison. The Child Care Liaison will forward the form to the Child Care Support Services Unit (CCSSU) at 109 East 16th Street, 10th Floor, New York, NY 10003 to the attention of the Summer Country and Day Camp Coordinator, who will expedite the enrollment process.

Camps Not Listed

**Camps Not Listed**

Refer to PD #04-49-EMP

For parents/guardians wanting to enroll a child in a camp that is not listed or not in ACCIS, the JOS/Worker must inform the parent/guardian that the camp must be willing to accept payment from HRA, complete the **W-273PP** and forward the completed form to CCSSU. CCSSU will enroll the camp into ACCIS.


If the camp does not accept payment from HRA but the parent/guardian still wishes to enroll the child in that particular camp, the JOS/Worker must inform the parent/guardian that it is the parent's/guardian's responsibility to pay the camp fees.

**PROGRAM IMPLICATIONS**

Paperless Office System (POS) Implications

Workers at POS Centers will record child care expenses on the Other Expenses Window in the “Has Child or Dependent Care Expenses?” question. POS does not budget any child care expenses entered. Workers at POS Centers may access ACCIS to make child care entries by minimizing POS and clicking on the ACCIS shortcut on the desktop



- Scan the completed and signed **W-273PP** and/or the **W-273B** form into the electronic case record. Enter a case comment for the child care by clicking on the case comments  icon or pressing <ALT>M on the keyboard.
- Scan all non-POS generated forms and notices that are signed by the individual into the electronic case record.

Food Stamp Implications

When actual summer child care expense exceeds the maximum allowable child care allowance, the excess child care expense is counted as an out-of-pocket expense for Food Stamp budgeting. This may or may not increase the Food Stamp allotment.

Medicaid Implications

There are no Medicaid implications.

**LIMITED ENGLISH SPEAKING ABILITY (LESA) IMPLICATIONS**

---

For Limited English Speaking Ability (LESA) applicants/participants, make sure to obtain appropriate interpreter services in accordance with Policy Directive #02-43-OPE.

---

**FAIR HEARING IMPLICATIONS**

Avoidance/Resolution

When a parent’s/guardian’s application for School Break Child Care Provider Application and Voucher Form (**W-273PP**), Expedited Summer Camp Program Enrollment Form (**W-274E**) or Summer Automated Child Care Eligibility and Enrollment (ACEE) (**W-274N**) is correct and the payments have not been authorized in a timely manner, s/he is entitled to request a Fair Hearing. In an effort to resolve the issue without a Fair Hearing, the JOS/Worker must review the case record and the documentation submitted. If all the documentation is in order and the provider is eligible, authorize payment.

**Conferences** When the parent/guardian requests a conference, the Receptionist must alert the Fair Hearing and Conference (FH&C) Unit.

The FH&C Supervisor I/AJOS I will listen to and evaluate the complaint. After reviewing the case record and discussing the issue with the JOS/Worker and other appropriate staff, the FH&C Supervisor I/AJOS I will decide to resolve or defend the case. This decision must be based on whether the provider is eligible under the State regulation and whether the payment was processed correctly.

The FH&C Supervisor I/AJOS I is responsible for making sure that the hearing and any further appeals are properly controlled and that appropriate follow-up is taken in all phases of the process.

**Evidence Packets** Evidence packets must include copies of the following:

- School Break Child Care Provider Application and Voucher Form (**W-273PP**); or
- Expedited Summer Camp Program Child Enrollment Form (**W-274E**); or
- Summer Automated Child Care Eligibility and Enrollment (**W-274N**); and
- Printout of the WMS or ACCIS Benefits History Screen;
- History Sheet.

---

**REFERENCES**

18 NYCRR, § 415.4


---

**RELATED ITEMS**

PD #04-49-EMP  
PB #02-119-OPE

---

**ATTACHMENTS**

 Forms can now be accessed through Print on Demand at all Job Centers.

- |                   |  |
|-------------------|--|
| <b>EXP-77P</b>    | Summer 2004 Parent Planning Letter (4/19/04)                                       |
| <b>W-273WW</b>    | Plan for Summer Vacation flyer (Rev. 4/19/04)                                      |
| <b>W-274E</b>     | Expedited Summer Camp Program Child Enrollment Form (Rev. 5/24/04)                 |
| <b>W-274E (S)</b> | Expedited Summer Camp Program Child Enrollment Form (Spanish) (5/24/04)            |
| <b>W-274N</b>     | Summer Automated Child Care Eligibility and Enrollment (ACEE) (5/24/04)            |
| <b>W-274N (S)</b> | Summer Automated Child Care Eligibility and Enrollment (ACCEE) (Spanish) (5/24/04) |
| <b>M-931</b>      | Summer Camp Acceptance form (5/24/04)  |



EXP-77P (face)  
4/19/04

FAMILY INDEPENDENCE ADMINISTRATION  
**OFFICE OF CHILD CARE** (Summer Mailing)  
180 Water Street 18<sup>th</sup> Floor  
New York, NY 10038



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

Parent Name  
Address  
City, State Zip

April 2004

Dear Parent:

It is time to make plans for your summer child care needs! The enclosed information will help you find summer programs you can enroll your child in. Below is a brief description of each program and information on how to register your child/children.

### **Summer Camps**

There are many camp programs throughout the city. Enclosed is a copy of the **SUMMER CAMP 2004** brochure produced by The City of New York Department of Health and Mental Hygiene, for the borough you live in. This brochure includes information on all of the summer camp programs that operated in NYC during summer 2003. To get the most updated information on summer camps go to: [www.nyc.gov/health](http://www.nyc.gov/health), click on "topics A to Z," type D and click on Day Camps.

### **Summer Child Care Programs**

Many of the child care centers that operate during the school year also operate during the summer. Information about these year-round programs is available at your Job Center.

### **Summer Country & Day Camp Programs**

This program includes nearly 200 Country (sleepaway) and Day Camp programs. To be eligible for this program your child must be active on public assistance and may be able to attend camp regardless of the parent's or guardian's public assistance status. Enclosed is a listing of the Summer Country Camps (sleepaway). Information about the Day Camps is available at your Job Center. Registration and enrollment for these programs is done directly through the Country or Day Camp.

### **Summer Activities**

The NYC Department of Youth and Community Development (DYCD) produces the New York City Guide to Summer Fun 2004, which will be available during the last week of June. The guide is a day-by-day listing of activities available throughout the New York City area that are either free or low cost. This is useful information for the whole family and children of all ages. To access the guide go to the DYCD web site at: [www.nyc.gov/dycd](http://www.nyc.gov/dycd).

Sincerely,

Julie Ibañez



Nombre del Padre o de la Madre  
Dirección  
Ciudad, Estado, Código Postal

abril 2004

Estimado(a) Padre o Madre:

¡Ha llegado la hora de planificar el cuidado infantil de verano! Los datos adjuntos le ayudarán a ubicar programas de verano en los que pueda matricular a sus hijos. A continuación se reseña cada programa, incluido el modo de inscripción.

### **Campamentos de Verano**

En toda la ciudad hay muchos programas de campamento. Adjunta se encuentra una copia del folleto **SUMMER CAMP 2004 (CAMPAMENTOS DE VERANO 2004)** publicado por el Departamento de Salud Física y Mental (The City of New York Department of Health and Mental Hygiene), del condado donde usted reside. Dicho folleto incluye información respecto a todos los programas de campamentos de Verano que se llevarán a cabo en la ciudad de Nueva York durante el verano del 2003. Para la información más actualizada sobre campamentos de Verano visite: [www.nyc.gov/health](http://www.nyc.gov/health), pulse el enlace "topics A to Z" (temas de A a Z), tecleé la D y pulse Day Camps (Campamentos Diurnos).

### **Programas de Verano de Cuidado Infantil**

Muchos de los centros de cuidado infantil no sólo están abiertos durante el año escolar, sino también durante el verano. Su Centro de Trabajo tiene información sobre estos programas que se llevan a cabo durante todo el año.

### **Programas de Verano Rurales & Diurnos**

Estos programas incluyen casi 200 Campamentos Rurales (de estadía) y Diurnos. Para tener derecho a uno de estos programas, su niño debe tener un caso activo de asistencia pública. El niño podría asistir al campamento sin importar el estado de asistencia pública del padre, de la madre o del tutor. Adjunta encontrará una lista de los Campamentos de Verano Rurales (de estadía). Los datos sobre los Campamentos Diurnos estarán disponible en su Centro de Trabajo. La Matriculación e inscripción de estos programas se realiza directamente mediante el Campamento Rural o Diurno.

### **Actividades de Verano**

El Departamento de la Juventud y Desarrollo Comunitario de la Ciudad de Nueva York (NYC Department of Youth and Community Development – DYCD) publica la Guía de Actividades de Verano Divertidas de la Ciudad de Nueva York para el 2004 (New York City Guide to Summer Fun 2004), que estará disponible durante la última semana de junio. Dicha guía sirve de calendario respecto a las actividades gratuitas o a bajo costo disponibles en toda el área de la Ciudad de Nueva York, lo que resulta conveniente para toda la familia y niños de todas edades. Para obtener acceso a dicha guía visite la página de Internet de DYCD: [www.nyc.gov/dycd](http://www.nyc.gov/dycd).

Atentamente,

Julie Ibañez

# Plan for Summer Vacation

## Are You Interested in Enrolling Your Child in Summer Camp?

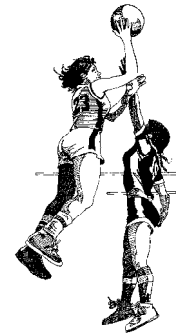
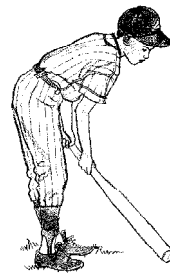
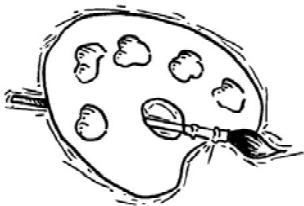
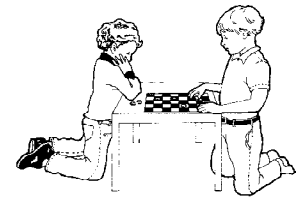
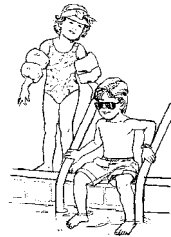
Your child(ren) will be out of school June 28th for summer vacation.

Have you thought about what your school-age child(ren) will do while you work or attend your work activity?

Summer camp offers your child(ren) a safe place to enjoy the summer with fun activities such as:



- Swimming
- Arts & Crafts
- Games
- Field Trips
- Educational Enrichment
- Sports
- Making New Friends
- Fun in the Sun and More!!!



Ask your Job Center for help finding a camp for your child(ren) or call these resources:

New York City Youthline  
Child Care Resource & Referral

(800) 246-4646  
(888) 469-5999

For help finding a camp for children with special needs, call Resources for Children with Special Needs, Inc. at (212) 677-4650.

If you already know which camp you want to send your child(ren) to, have the camp fill out the Expedited Summer Camp Program Child Enrollment Form (W-274E) and bring it to your Job Center.

# Prepárese Para Las Vacaciones de Verano

## ¿Está usted Interesado(a) en Enviar a Sus Hijos a un Campamento de Verano?

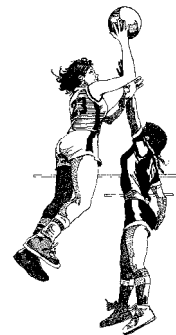
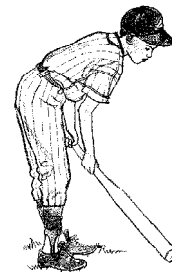
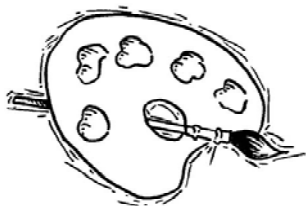
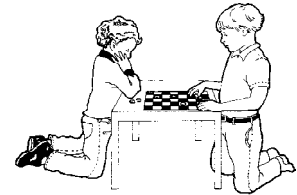
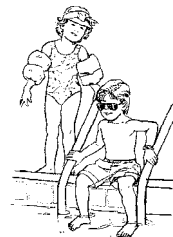
Sus hijos saldrán de la escuela para empezar las vacaciones de verano el 28 de junio.

¿Ha pensado en qué harán sus hijos de edad escolar mientras usted trabaje o asista a su actividad de trabajo asignada?

Los campamentos de verane le ofrecen a sus hijos un lugar seguro para disfrutar del verano mediante de actividades divertidas como:



- Natación
- Artes y Oficios
- Juegos
- Excursiones
- Enriquecimiento Educativo
- Deportes
- Nuevas Amistades
- ¡¡¡Diversión Bajo el Sol y Más!!!



Pregunte en su Centro de Trabajo para que le ayuden a ubicar un campamento para su(s) niño(s) o acuda a los siguientes recursos llamando a:

Línea de la Juventud (NYC Youthline)  
Recursos y Envíos para Cuidado Infantil

(800) 246-4646

(888) 469-5999

Si necesita ayuda para ubicar un campamento para niños con necesidades especiales, llame a Recursos para Niños con Necesidades Especiales (Resources for Children with Special Needs, Inc.) al (212) 677-4650.

Si ya usted sabe a cuál campamento le gustaría enviar a sus hijos, obtenga un Formulario de Inscripción Acelerada en el Programa de Campamento de Verano (W-274E), asegúrese de que se lo llenen en el campamento y tráigalo a su Centro de Empleo.



## Expedited Summer Camp Program Campsite Child Enrollment Form

### Camp Information

Summer Camp Name: \_\_\_\_\_

Camp Address: \_\_\_\_\_

Camp Address Line 1

Camp Address Line 2

City

State

Zip Code

ACCIS Program Number: \_\_\_\_\_

### Family Information

Parent Name: \_\_\_\_\_  
First Name      M.I.      Last Name

Parent Address: \_\_\_\_\_

Parent Address Line 1

Parent Address Line 2

City

State

Zip Code

Public Assistance Case Number: \_\_\_\_\_

Parent Social Security Number: \_\_\_\_\_  
(optional)

|   |
|---|
| Will the child(ren)<br>return to the same<br>school year provider?* |
|---|

| Child(ren)'s Name | Date of Birth | Camp Start Date | Camp End Date | Yes | No |
|-------------------|---------------|-----------------|---------------|-----|----|
|                   |               |                 |               |     |    |
|                   |               |                 |               |     |    |
|                   |               |                 |               |     |    |
|                   |               |                 |               |     |    |
|                   |               |                 |               |     |    |
|                   |               |                 |               |     |    |

|                                |                                     |
|--------------------------------|-------------------------------------|
| _____<br>Signature of Parent   | _____<br>Date                       |
| _____<br>Name of Camp Director | _____<br>Signature of Camp Director |
| _____<br>Date                  | _____<br>Date                       |

Fax this form along with the Summer Camp Acceptance Form (**M-931**) to the  
Summer Country and Day Camp Coordinator at (212) 835-7739.

\* If no, inform parent that s/he must complete a new Child Care Provider Application and Voucher Form (**W-273B**).



## Formulario de Inscripción Acelerada de Niños en el Programa de Campamentos de Verano

### Información sobre el Campamento

Nombre del Campamento de Verano: \_\_\_\_\_

Dirección del Campamento de Verano: \_\_\_\_\_

Línea de Dirección 1 del Campamento

Línea de Dirección 2 del Campamento

Ciudad

Estado

Código Postal

Número del Programa ACCIS: \_\_\_\_\_

### Información sobre la Familia

Nombre del Padre/de la Madre: \_\_\_\_\_  
Nombre I. Apellido

Dirección del Padre/de la Madre: \_\_\_\_\_

Línea 1 de Dirección del Padre/de la Madre

Línea 2 de Dirección del Padre/de la Madre

Ciudad

Estado

Código Postal

Número del Caso de Asistencia Pública: \_\_\_\_\_

Número del Seguro Social del Padre/de la Madre: \_\_\_\_\_  
(opcional)

¿Regresarán los niños al mismo proveedor del año escolar?\*

| Nombre(s) del/de los Niño(s) | Fecha de Nacimiento | Fecha en que Comienza el Campamento | Fecha en que Termina el Campamento | Sí | No |
|------------------------------|---------------------|-------------------------------------|------------------------------------|----|----|
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |

|  |   |
|--|---|
| Firma del Padre/de la Madre _____        | Fecha _____                             |
| Nombre del Director del Campamento _____ | Firma del Director del Campamento _____ |
|  | Fecha _____                             |

Envíe este formulario por fax con el formulario de Aceptación al Campamento de Verano (**M-931**) al Coordinador de Campamentos de Verano Rurales y Diurnos al (212) 835-7739.

\* De ser "No", infórmele al padre/a la madre que debe llenar una nueva Solicitud y Comprobante del Proveedor de Cuidado Infantil (**W-273B [S]**).



## Summer Automated Child Care Eligibility and Enrollment (ACEE)

### Camp Information

Summer Camp Name: \_\_\_\_\_

Camp Address: \_\_\_\_\_

Camp Address Line 1

Camp Address Line 2

City

State

Zip Code

ACCIS Program Number: \_\_\_\_\_

### Family Information

Parent Name: \_\_\_\_\_

First Name

M.I.

Last Name

Parent Address: \_\_\_\_\_

Parent Address Line 1

Parent Address Line 2

City

State

Zip Code

Public Assistance Case Number: \_\_\_\_\_

Parent Social Security Number: \_\_\_\_\_

(Optional)

|  |
|--|
| Will the child(ren)<br>return to the same<br>school year provider? |
|--|

| Child(ren)'s Name | Date of Birth | Camp Start Date | Camp End Date | Will the child(ren) return to the same school year provider? |    |
|-------------------|---------------|-----------------|---------------|--|----|
|                   |               |                 |               | Yes  | No |
|                   |               |                 |               |  |    |
|                   |               |                 |               |  |    |
|                   |               |                 |               |  |    |
|                   |               |                 |               |  |    |
|                   |               |                 |               |  |    |

I understand and acknowledge that the program will have access to the names of all children under the age of 16 in the household. I authorize HRA to provide the program with information about my children's eligibility for participation and enrollment in this program.

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_

Are you the parent of all children under the age of 16 in the household?  Yes  No

**If no, the head of household must sign this form.**

Head of Household Name (please print) \_\_\_\_\_

Head of Household Signature \_\_\_\_\_

Date \_\_\_\_\_

Camp Director Name (please print) \_\_\_\_\_

Camp Director Signature \_\_\_\_\_

Date \_\_\_\_\_

Fax this form along with the Summer Camp Acceptance Form (M-931) to the  
Summer Country and Day Camp Coordinator at (212) 835-7739.



## Inscripción y Elegibilidad Automatizada de Cuidado Infantil de Verano (ACEE)

### Información del Campamento

Nombre del Campamento de Verano: \_\_\_\_\_

Dirección del Campamento de Verano: \_\_\_\_\_

Línea de Dirección 1 del Campamento

Línea de Dirección 2 del Campamento

Ciudad

Estado

Código Postal

Número del Programa ACCIS: \_\_\_\_\_

### Información sobre la Familia

Nombre del Padre/Madre: \_\_\_\_\_

Nombre

I

Apellido

Dirección del Padre/Madre: \_\_\_\_\_

Línea de Dirección 1 del Padre/Madre

Línea de dirección 2 del Padre/Madre

Ciudad

Estado

Código Postal

Número del Caso de Asistencia Pública: \_\_\_\_\_

Número del Seguro Social del Padre/Madre: \_\_\_\_\_  
(Opcional)

¿Regresarán los niños al mismo proveedor del año escolar?

| Nombre(s) del/de los Niño(s) | Fecha de Nacimiento | Fecha de Comienzo en del Campamento | Fecha en que Termina el Campamento | Sí | No |
|------------------------------|---------------------|-------------------------------------|------------------------------------|----|----|
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |
|                              |                     |                                     |                                    |    |    |

Entiendo y reconozco que el programa tendrá acceso a los nombres de todos los niños en el hogar menores de 16 años de edad. Autorizo a la Administración de Recursos Humanos (Human Resources Administration – HRA) a que proporcione información sobre la elegibilidad de mi(s) hijo(s) respecto a la inscripción y participación en el programa.

Firma del Padre/Madre \_\_\_\_\_

Fecha \_\_\_\_\_

¿Es usted el padre/madre de todos los niños menores de 16 años en el hogar?  Sí  No

**De ser no, el jefe del hogar debe firmar este formulario.**

Nombre del Jefe del Hogar (en letra de molde, por favor) \_\_\_\_\_

Firma del Jefe de Hogar \_\_\_\_\_

Fecha \_\_\_\_\_

Nombre del Director del Campamento (en letra de molde, por favor) \_\_\_\_\_

Firma del Director del Campamento \_\_\_\_\_

Fecha \_\_\_\_\_

Envíe un fax de este formulario junto al formulario de Aceptación al Campamento de Verano (Summer Camp Acceptance Form) (M-931) al Coordinador del Campamento Diurno y Rural de Verano al (212) 835-7739.





**Summer Camp Acceptance**  
Fax form to (212) 835-7739

|  |
|--|
| Please <input checked="" type="checkbox"/> check one:<br><input type="checkbox"/> Day Camp <input type="checkbox"/> Country Camp |
|--|

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

To: \_\_\_\_\_  
Summer Day and Country Camp Coordinator

From: \_\_\_\_\_  
Name of Summer Camp

\_\_\_\_\_  
Name of Summer Camp Employee

Program Name: Summer Day and Country Camp Unit

Program Address: 109 East 16th Street, 10th floor  
New York, NY 10003

|                               |                         |                       |
|-------------------------------|-------------------------|-----------------------|
| Summer Camp Telephone Number: | Summer Camp Fax Number: | ACCIS Program Number: |
|-------------------------------|-------------------------|-----------------------|

| Child's Name | Public Assistance Number | Sex   | Date of Birth | Period Assigned to Camp |    | Eligibility Outcome |
|--------------|--------------------------|---|---------------|-------------------------|----|---------------------|
|              |                          |   |               | From                    | To |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |
|              |                          | <input type="checkbox"/> M <input type="checkbox"/> F |               |                         |    |                     |

How many **W-274Es** are attached? \_\_\_\_\_

Checked and approved by: \_\_\_\_\_

\_\_\_\_\_  
Summer Day and Country Camp Liaison

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Date