



Umpqua Community College
 Financial Aid Office
 PO Box 967
 Roseburg, Oregon 97470
 541.440.4602 | 541.440.4612 (FAX)
 FinancialAid@umpqua.edu

Child Care Cost Add-On Request

Student Name _____ Student ID# _____

A standard increase for dependent care costs may be added to your cost of attendance and may increase your Federal Work-Study and Student Loan Eligibility only. If you want to be considered for this increase to your cost of attendance, complete this form and return it to the Financial Aid Office for review. This request does not guarantee that you will receive additional financial assistance.

List the name of each child, their age, and the terms that you will be attending:

Name of Child	Age	Summer	Fall	Winter	Spring
Lucy Lei (Example)	4		X	X	X

➡ DID YOU KNOW? UCC has a daycare facility on campus called the Ford Childhood Enrichment Center (FCEC). FCEC provides high quality education and care for children ages 6 weeks to 5 years of age. They also provide excellent educational and practicum experiences for Early Childhood Education students along with providing great support for families. Contact FCEC for more information about enrollment by calling 541.440.4650 or 541.440.7741.

➡ The Financial Aid Office bases all increases made for child care costs to your student budget from the fee schedule at the FCEC in the amount of \$1810 per term per child.

I certify that I pay daycare costs for these dependent(s) while I am going to school. I certify that my daycare costs are not being paid by an other agency or source. (E.g., state child care assistance (DHS), ERDC, or parent/spouse who covers daycare costs)

By signing below, I certify that the above information is true and correct. I also understand that if I give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.

Student Signature: _____	Date: _____
--------------------------	-------------

Office Use Only				
Amount per Term	X	# of Terms	=	Allowance
	X		=	\$
	X		=	\$
	X		=	\$
	X		=	\$
Total Allowance Added To Budget				\$
Financial Aid Signature _____			Date _____	