

Do you Receive WI Shares Child Care or W2?

Please Sel	ect One:						
	Yes, I have an Open WI Shares Child Care Case. My Case Number is: I will call (1-888-794-5556) to update my Child Care						
	Authorization.						
	Yes, I receive W2. My Case Number is: I will contact my FEP worker to update my Child Care Authorization.						
	No, I currently do not receive WI Shares Child Care or W2. I understand that I must complete the information below to determine if I am eligible.						
Signature		Date:			Phone Number:		
Am I Eligible? Please complete the following information. All information is required for a completed COA Membership application if you do not have an open WI Shares Child Care or W2 case.							
	List all Adults		ıold			Monthly Income Information	
First Name		Current Health Insurance?	Currently Working?			Total Monthly Gross Income for your Household	\$
		☐ Yes		Yes	Į Ļ	from Job(s):	
		☐ Yes	☐ Yes			OR	
						Hours Hours Worked Per Week	
List all Children in Household						Amount Earned Per	\$
(Continue list on back of sheet if needed.)						Hour:	T
Firs	First Name Chil		Current Health Insurance?			Do you receive any Additional Income? Check all that apply:	
				Yes		☐ Child Suppor	rt □ W2 Payments
				Yes		☐ Social Secu	•
				Yes	l	☐ Unemployment☐ Other:	
				Yes	l	Total Additional Monthly Income Received:	\$
] [Yes			
For Office Use Only: Eligible? Yes No Parent Needs to Update Auth If Eligible, Date Contacted: Notes:							