

Recertification Signature Page

Please read the important the consents and certifications below

NOTICES/AGREEMENTS:

1. I understand that the information contained on this form will be used to determine my family's eligibility for services/subsidy. I understand that by signing this application form, I agree to any investigation to verify or confirm the information I have given or any other investigation in connection with my request for child care assistance. If additional information is requested, I will provide it.
2. I understand that this recertification is used only for the expressed purpose of child care subsidy. To obtain other assistance such as SNAP, Medicaid, Cash Assistance, or other services, additional applications will be required. However, this application and any information obtained as part of an investigation of this application may be shared with any City, State, or Federal agency to which you apply or have applied for any other assistance or benefits.
3. I understand that the availability of Child Care Subsidies is dependent on funding and if there is no funding my child may be placed on the waiting list.
4. It is the policy and commitment of the New York City Administration for Children's Services that does not discriminate on the basis of race, creed, age, color, sex, religion, national origin, alienage or citizenship status, physical or mental disability, gender, gender identity, sexual orientation, pregnancy, marital or partnership status.
5. I swear and/or affirm under the penalties of perjury that all of the information I have given or will give to the New York City Administration for Children's Services relating to Child Care Assistance is correct.

PENALTIES:

- Federal and state laws provide for penalties of fine, imprisonment, or both if you do not tell the truth when you apply for Child Care Assistance or when you are questioned about your eligibility, or if you cause someone else not to tell the truth regarding your application or continuing eligibility. Penalties also apply if you conceal or fail to disclose facts regarding your initial or continuing eligibility for Child Care Assistance; or if you conceal or fail to disclose facts that would affect the right of someone, for whom you have applied, to obtain or continue to receive Child Care Assistance. If you are the authorized representative applying on behalf of someone else, Child Care Assistance must be used for that person and not yourself. It is unlawful to obtain Child Care Assistance by concealing information or providing false information.
6. I agree to notify ACS immediately of any changes in information regarding my family income and composition, child care arrangements and any other circumstance related to my family's eligibility for child care services.

CHANGES:

The applicant is responsible for providing accurate, complete, and current information regarding family income and composition, child care arrangements and any other circumstances related to the family's eligibility for child care services, and for notifying the social services district immediately of any changes in such information.

CERTIFICATION:

CITIZENSHIP – I understand that by signing this application form I certify, under penalty of perjury, that all the children in need of Child Care Assistance are United States citizens or nationals or persons with satisfactory immigration status. I understand that this information about these children may be submitted to the Immigration and Naturalization Service for verification of immigration status, if applicable. I further understand that the use or disclosure of this information about these children is restricted to persons and organizations directly connected with the verification of immigration status and the administration or enforcement of provisions of the Child Care Assistance program.

FAMILY RESOURCES:

I /we certify that my family resources do not exceed \$1,000,000.00.

If two parent/guardian household the signatures of both parents/guardians are required.

Parent/Caretaker (*sign*) _____

Date: _____

Parent/Caretaker
(*print*) _____

Second Parent/Caretaker (*sign*) _____

Date: _____

Second Parent/Caretaker (*print*) _____

Authorized Representative (*sign*) _____

Date: _____

Authorized Representative (*print*) _____