

CHILD CARE REFERRAL FORM

A HOW TO GUIDE

We understand the importance and benefits of child care for children and families. Most children benefit from a **structured day, routine, and socialization**. However, for the purpose of this referral please provide **supporting detail specific to the need for child care**.

***Please note: only children that have secured a child care spot would be considered for subsidy.**

Referring Agency / Health Care Professional (please print):

Contact Name: _____
Referring Agency: _____
Title/Position: _____ Phone Number: _____
Email Address: _____
Address: _____

Consent:
I verify that I have obtained a consent form from the parent/guardian which allows our agency/office to share the information on this form for the purpose of determining eligibility for child care fee subsidy.

Referring Source Signature: _____ Date: _____

Referring Agency's contact information for office use.

Referring Agency is responsible to obtain consent from the Parent/Guardian.

Referral Details (please print):

Service Length: 1-3 months 3-6 months 6-12months

***A referral can only be granted for as long as you are working with the child/family but not more than 12 months. Typically, referrals are for **2 full days or 4 half days** of child care per week.

Reason for Referral:

- Parent's needs (Parent's name: _____ Date of Birth: _____)
 Child's needs (Child's name: _____ Date of Birth: _____)

Referrals are valid for as long as you are working with the family, up to a maximum of 12 months.

Typically, child care is granted for 2 full days or 4 half days.

Examples of potential reasons:

Mental Health: parent attending regular mental health programs with a care plan.

Emergency-at-risk / Family Crisis: family residing in shelter and is working towards stable housing.

Communicative Needs: child diagnosed with a speech delay and has treatment plan.

Reason	Yes/No		
Physical Limitations	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected	Communicative Needs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected
Medical Need	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected	Developmental Needs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected
Mental Health	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected	Emergency-at-risk / Family Crisis	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected
Cognitive Impairment	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected	Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Suspected

FREQUENTLY ASKED QUESTIONS

What if neither parent is working or in school? Can they apply for subsidy?

Yes, subsidy is available for part time child care if the child or parent has a “recognized need”. Through completing the Referral Form, you will be explaining the reason you support this child and/or parent accessing licensed child care.

Do Referrals give a family “priority” for a child care space?

No, all children need to be on the Child Care Waitlist Registry. Once a child has been placed off the waitlist then a Referral can be issued.

Do Referral forms expire?

Yes. Expiry dates can vary from 6 months to 1 year. Your Case Manager will reach out if a new Referral form is required.

As the referring professional, I feel more than 2 days of care are required. Can I request additional days?

Please request a case conference with a Child Care Subsidy Case Manager in these situations.

Does having a Referral mean that a family is eligible for subsidy?

A Referral does not automatically mean a family will qualify for subsidy. Eligibility for Child Care Subsidy is based on a secured child care spot, a reason for service, and financial need.

Who can complete a Referral Form?

We can accept referrals from the following:

- Professional working with the family (example: Children’s Treatment Centre, LINCK, Women’s Centre, etc.)
- Family physician
- Ontario Works Case Manager

Can a letter be submitted instead of a Referral form?

We require a completed Referral form from referring agencies. If needed, please request a case conference.

Who do I submit a Referral to?

Email: CKChildcare@chatham-kent.ca
Fax: 519-351-5090 (ATTN: CCEY)
Drop off: 435 Grand Ave, Chatham, 2nd Floor
Child Care & Early Years