



West CAP Skills Enhancement Program
136 N. Riverwalk
River Falls, WI 54022
Phone: 715.426.9031 Fax 715.426.9015

Participant Name _____ For: Month _____ Year _____

Name of child care provider _____

Address _____ City _____ Zip _____

Phone # _____ Federal Employer ID # _____ Soc. Sec # _____

Check one: Licensed group _____ Licensed family _____ Certified _____ Other _____

Participant's name & address _____

Enter child's name	Enter child's age
1.	
2.	
3.	

Cost per: hour _____ day _____ week _____ **for:** 1st child \$ _____ 2nd child \$ _____ 3rd child \$ _____

Date	Hours			Total hours	Date	Hours			Total hours
	1st child	2nd child	3rd child			1st child	2nd child	3rd child	
1					17				
2					18				
3					19				
4					20				
5					21				
6					22				
7					23				
8					24				
9					25				
10					26				
11					27				
12					28				
13					29				
14					30				
15					31				
16					Total hours for all days ----->				

Signatures verify the information stated above is true and correct. Falsification of information may result in termination from the program and legal action.

The Skills Enhancement Program assists with childcare for up to six credits, with a maximum of 12 hours per week per child. The program pays \$1.75 /hour per child for childcare while a program participant is engaged in school related activities. There is a maximum reimbursement of \$125 a month for each participant.

Participant's signature _____ Date _____

Provider's signature _____ Date _____

Authorized by _____ Date _____

Total \$ _____ Code _____