

## Special Social Needs Referral for Child Care Fee Subsidy

**To be completed by family requesting child care fee subsidy (please print)**

Name (parent/guardian): \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of Child(ren): \_\_\_\_\_

I hereby consent to the release of information by the referring agency to an authorized representative of the Children's Services Program, for the City of Peterborough.

\_\_\_\_\_  
Applicant Name (print)                      Signature of Applicant                      Date

**To be completed by referring agency (please print)**

Name of Agency: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Referrer's Name: \_\_\_\_\_

Please choose the need for child care:

Special Need - Child                      Social Need - Child                      Medical Need - Parent

When is child care needed (DD/MM/YYYY)

Start Date: \_\_\_\_\_ End Date \_\_\_\_\_

Please describe in detail the nature of the child's Special or Social needs OR specify limitations to activities of daily child care if based on parents' medical need.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Referrer's Name (print)                      Signature of Referrer                      Date

The number of days child care is provided/approved will be determined by Children's Services.  
Completion of this form does not guarantee eligibility

**Notice with Respect to the Collection of Personal Information  
(Municipal Freedom of Information and Protection of Privacy Act)**

The personal information on this form is collected under the legal authority of section 71(1) of the Child Care and Early Years Act, 2014, S.O. 2014, c. 11, Sched. 1 (the "Act") and section 9 of Ontario Regulation 138/15 under the Act. Personal information will be used by Social Services Division staff for the purpose of administering subsidized childcare in the City and County of Peterborough, as well as any other services and programs prescribed or authorized under this Act. For more information contact the Manager of Children's Services, or designate, at 178 Charlotte St, Peterborough, ON K9J 8S1 or by email at [socialservices@peterborough.ca](mailto:socialservices@peterborough.ca)