



**HUCTW-Harvard University  
Childcare Fellowship Verification Form  
January 1, 2020 - December 31, 2020**



Verification forms need to be returned to the HUCTW office according to the following deadlines. Please submit one verification form per provider each quarter (example: Jan/Feb/Mar is the first quarter). Do NOT use this form if you put your award money into an FSA.

Verification form DEADLINES:	For childcare for the months of:	Award included in paycheck:
<b>February 21, 2020</b>	January, February, March	March 27, 2020
<b>May 15, 2020</b>	April, May, June	June 19, 2020
<b>August 21, 2020</b>	July, August, September	September 25, 2020
<b>November 6, 2020</b>	October, November, December	December 18, 2020

**Print, fill out, and return this form to the HUCTW Office by one of the following methods:**

- Upload to our secure server: [huctw.org/submit-verification](http://huctw.org/submit-verification) (as scan or cellphone photo)
- Email: [huctw.childcare@huctw.org](mailto:huctw.childcare@huctw.org) (as scan or cellphone photo)
- Fax: 617-661-9617
- Mail: HUCTW Childcare Coordinators, 15 Mt. Auburn Street, Cambridge, MA 02138

Your name (parent): \_\_\_\_\_ Your Harvard ID: \_\_\_\_\_

Best daytime phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

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*Your childcare provider needs to fill out and sign following section*

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Name of childcare provider: \_\_\_\_\_

Provider license number: \_\_\_\_\_

(In-home providers, please provide last 4 digits of soc. security number)

Provider's address: \_\_\_\_\_

**This is to verify that I have provided/will provide childcare for:**

\_\_\_\_\_ **during the following months:**

Name of child/ren

**IMPORTANT:** Please write the total amount the parent spent on childcare for each month below. The childcare provider should sign below to confirm these amounts. If provider is unable to sign, we will accept receipts instead. Submit one form per provider each quarter (example: Jan/Feb/Mar is first quarter).

Jan 2020 \$ \_\_\_\_\_   
  Apr 2020 \$ \_\_\_\_\_   
  Jul 2020 \$ \_\_\_\_\_   
  Oct 2020 \$ \_\_\_\_\_  
 Feb 2020 \$ \_\_\_\_\_   
  May 2020 \$ \_\_\_\_\_   
  Aug 2020 \$ \_\_\_\_\_   
  Nov 2020 \$ \_\_\_\_\_  
 Mar 2020 \$ \_\_\_\_\_   
  Jun 2020 \$ \_\_\_\_\_   
  Sep 2020 \$ \_\_\_\_\_   
  Dec 2020 \$ \_\_\_\_\_

\_\_\_\_\_  
**Signature of Childcare Provider**

\_\_\_\_\_  
**Date**