Participant Childcare Expense Reimbursement Request & Childcare Log

Participant Information			
Participant Name		Participant ID	
Service Enrolled In			

Child or dependent care reimbursement rate is reimbursed using the Wisconsin Department of Children and Families Child Care Subsidy Maximum Rates. Milwaukee County rates are shown on page 12 using the following link: https://dcf.wisconsin.gov/files/wishares/pdf/max-rates-statewide.pdf

Child (Use additional forms for additional children receiving care from the same provider)			
Child 1 Name		Age	
Child 2 Name		Age	
Child 3 Name		Age	

Childcare Provider (Use a separate form for each provider)					
Name					
Address					
City		State		Zip	
Phone					
SSN or FEIN #					

Childcare Expenses (See attached log)					
Child 1	Week	Hours	Rate $	Amount $	Out of Pocket Cost $
	Week 1		$	$ 0.00	$
	Week 2		$	$ 0.00	$
	Week 3		$	$ 0.00	$
	Week 4		$	$ 0.00	$
	Week 5		$	$ 0.00	$
	Total Child Care Expenses for Child 1			$ 0.00	$ 0.00
Child 2	Week	Hours	Rate $	Amount $	Out of Pocket Cost $
	Week 1		$	$ 0.00	$
	Week 2		$	$ 0.00	$
	Week 3		$	$ 0.00	$
	Week 4		$	$ 0.00	$
	Week 5		$	$ 0.00	$
	Total Child Care Expenses for Child 2			$ 0.00	$ 0.00
Child 3	Week	Hours	Rate $	Amount $	Out of Pocket Cost $
	Week 1		$	$ 0.00	$
	Week 2		$	$ 0.00	$
	Week 3		$	$ 0.00	$
	Week 4		$	$ 0.00	$
	Week 5		$	$ 0.00	$
	Total Child Care Expenses for Child 3			$ 0.00	$ 0.00
			Grand Totals	$ 0.00	$ 0.00
			Reimbursement Amt. Requested	$	

Signatures			
Participant Signature		Date	
Career Planner Signature		Date	

NOTE: You must submit this reimbursement request and any receipts no later than 10 business days from the last expense date identified on this form. A Monthly Attendance Record MUST be submitted for each month you submit a Childcare Reimbursement request.

Childcare Log (Use one log per child)										
Participant Information										
Participant Name					Participant ID					
Child Name										
Month						Year				
Week 1	Date	Start Time	End Time	# of Hrs.		Week 2	Date	Start Time	End Time	# of Hrs.
Monday						Monday				
Tuesday						Tuesday				
Wednesday						Wednesday				
Thursday						Thursday				
Friday						Friday				
Week 3	Date	Start Time	End Time	# of Hrs.		Week 4	Date	Start Time	End Time	# of Hrs.
Monday						Monday				
Tuesday						Tuesday				
Wednesday						Wednesday				
Thursday						Thursday				
Friday						Friday				
Week 5	Date	Start Time	End Time	# of Hrs.						
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										

Form Date: 07.16.26