

## Student Financial Services Office • 197 Franklin St. Auburn, NY 13021 315-294-8470 • Fax - 315-252-2185 financialservices@cayuga-cc.edu

## 2022-2023 Child Care Expense Documentation

Student's Printed Name	C #
I am requesting that my Financial Aid Co College be increased due to the following	
Number of children for whom care must be prov	vided
Ages of children	
Average number of hours per week that care mu	ast be provided
Number of weeks that care must be provided (1	5 weeks per semester)
(30	) weeks per year)
Total amount paid for child care for the above p	eriod \$
Name of child care provider	
Signature of child care provider	
Signature of Student_	Date