

**Department for Children and Families****Child Development Division**

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*Agency of Human Services*

**[www.dcf.state.vt.us](http://www.dcf.state.vt.us)**

Dear Child Care Provider:

Attached you will find the Provider Agreement: Financial, Part 1. You will need to complete and sign this form if: 1) You are a new provider and wish to receive payments of any kind from the Child Development Division (CDD); 2) Your current Provider Agreement: Financial, Part I has expired; 3) You wish to make changes to the current Provider Agreement; Financial, Part I, we have on file for you.

It is very important that you fill out this form completely and as accurately as possible for the following reasons:

- It is a legal agreement between you and CDD that, once completed, signed, and processed, ensures the money is used as intended and enables us to pay you.
- The funds that we manage come from state and federal sources with specific reporting requirements. Some of the information we ask you for on this form is because we are required to collect it as a condition of receiving the funding that we pass along to you. An example is the rates you actually charge for care. By reporting these rates (converted into the formula in Section B on the Provider Agreement: Part I Form), you are providing federal and state policy makers with real numbers and better informing their policy decisions. This is good for everyone and best for children and families.
- If you are billing us for payment for a family participating in the subsidized child care program, it is important to understand that by law we can only pay the maximum state subsidized care rate for which the family is eligible OR your rate, whichever of the two is less. A copy of the State Child Care Rate tables is included for your review.

You are free to set your own rates in whatever structure that makes sense for your business. Just because we ask you to give us your rates in a very specific format does not mean that you must change how you charge. We do need you to convert your rates into the pre-defined structure in section B of the Provider agreement because that is the format used for our payments and market rate calculations. If you have questions about completing the form, please call our Help Desk at 1-800-649-2642 and someone will be happy to assist you.