

RIVER'S EDGE CHILDCARE CENTER

Bridge Scholarship Application

SECTION 1 — FAMILY INFORMATION

Parent/Guardian Name(s):	
Address:	
Phone:	
Email:	
Child(ren) Enrolled at River's Edge:	
Start Date at River's Edge:	

SECTION 2 — CCA STATUS

Date CCA Application Submitted:	
Case Number (if assigned):	

Upload/Attach Proof of CCA Application Submission.

SECTION 3 — FINANCIAL INFORMATION

Household Size: _____

Monthly Household Income: \$_____

Describe your financial need and why temporary assistance is required:

SECTION 4 — EMPLOYMENT INFORMATION

Are you currently employed? Yes No

Employer Name: _____

Position: _____

Length of Employment: _____

Monthly Income: \$_____

SECTION 5 — REQUIRED DOCUMENTATION

Please attach:

- Proof of CCA application submission
- Any additional documentation requested by the Director

SECTION 6 — FAMILY RESPONSIBILITIES (Initial Each Line)

- ___ I understand the Bridge Scholarship is temporary and may last up to 30 days.
- ___ I will notify River’s Edge immediately when CCA approval or denial is received.
- ___ I will submit all documentation requested by River’s Edge and CCA.
- ___ If a reduced payment is approved, I will pay the reduced weekly balance every Friday.
- ___ I understand the scholarship ends immediately once CCA becomes active.

SECTION 7 — SIGNATURE

I certify that all information provided is true and complete. I understand that providing false or incomplete information may result in loss of scholarship eligibility.

Parent/Guardian Signature: _____ Date: _____

Director Signature (Office Use): _____ Date: _____