



**USDA Child Care Subsidy Administration Program (CCS)**  
 United States Department of Agriculture

**National Park Service (NPS) Child Care Subsidy (CCS) Program  
 Employee/Family Update Form**

NPS Employee Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary phone number: \_\_\_\_\_ Alternate phone number: \_\_\_\_\_

Government email address: \_\_\_\_\_

Alternate email address: \_\_\_\_\_

Alternate email address \_\_\_\_\_

Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Partner

Spouse/Partner Name: \_\_\_\_\_

Spouse/Partner update to work and or school.

New/Current Employer: \_\_\_\_\_

New/Current School/University: \_\_\_\_\_

No longer enrolled in school or working, requesting Special Consideration for 90 days to seek employment and/or enroll in a school program (see Form "Certification for Seeking Employment and-or Enroll in School NPS 2010-04").  
 Last day of work/school: \_\_\_\_\_

**Child Custody Arrangement/Agreement**

Child's Name: \_\_\_\_\_

- \_\_\_\_\_ Now resides in the home with the qualifying Employee
- \_\_\_\_\_ No longer resides in the home the qualifying Employee

Child's Name: \_\_\_\_\_

- \_\_\_\_\_ Now resides in the home with the qualifying Employee
- \_\_\_\_\_ No longer resides in the home the qualifying Employee

Child's Name: \_\_\_\_\_

- \_\_\_\_\_ Now resides in the home with the qualifying Employee
- \_\_\_\_\_ No longer resides in the home the qualifying Employee

**Upon certifying and returning this form to the USDA Subsidy Administration Section, I am authoring the change(s) above to the information on file with the USDA.**

\_\_\_\_\_  
**Signature of Qualifying NPS Employee / Last 4 of SSN** \_\_\_\_\_  
**Date**

Submit to the USDA  
 Email: [npschildcare@gsa.gov](mailto:npschildcare@gsa.gov)  
 Phone: (866) 508-0371 | Fax: (816) 823-5432  
 2300 Main St – 2SE, KCMO 64108