



S.T.A.R. PROJECT

Entry Eligibility Declaration Entry, Permit, Degree & Professional Track FY 05-06



For Office Use	
<input type="checkbox"/>	CARES
<input type="checkbox"/>	AB 212

All STAR applicants wishing to apply for a FY 05-06 stipend must complete the following declaration. Please fill in your name, read and mark each statement as appropriate, indicate the program in which you work, sign and date the form. Declarations must be returned by **Monday, September 12, 2005** to the address below.

I, _____ declare that the following information is true and correct.

1. Please Mark the **ONE** that applies

- I am a **licensed FCC** owner that **works directly with children** OR
- I am an employee of a **licensed FCC** home and **work directly with children** OR
- I am a **licensed exempt FCC** provider that **works directly with children** OR
- I **work directly with children** in a **licensed** center based facility OR
- I **directly supervise staff that work directly with children** in a licensed center based program and I am located on site with the staff. OR
- I work directly with children in a center based or FCC program that is **legally exempt from licensure**.

2. I have provide child care **for pay at least 15 hours per week** for 2 or more non-related children birth to five in the same California Department of Social Services/ Community Care licensed or licensed exempt family child care home, state preschool, Head Start or child care center. Yes No

3. I have provided care in the same licensed or licensed exempt child care program for at **least 9 month** during the past year. (Sept 2004 – June 2005) Yes No
Which child care program? _____

4. I earn less than **\$60,000** annually in child care. Yes No

5. I am receiving stipend funds from only **one** county in California. Yes No

6. I provide care in a **STAR priority zone**. Yes No
See reverse side for priority zone listing

Family Child Care Providers DO NOT answer question # 7.

7. I work at one of the **state subsidized center based child care** programs in Santa Barbara County. Which program? _____ Yes No

Signature _____

Date _____

Return form to:
Office of Early Care and Education, First 5
1 E. Anapamu, Suite 200
Santa Barbara, CA 93101



Santa Barbara County STAR Priority Zones

If you operate or work in a program that is located in either the following zip code or within one of the elementary school boundaries listed below you are considered providing care in a priority zone and should mark “YES” to question 6.

Please note: First priority for First 5 funds is to early care and education providers who work in a priority zone. The STAR project has other funding sources to support programs not located in these priority zones.

Low Supply Zip Code Areas:

93434 Guadalupe
93440 Los Alamos
93437 Vandenberg AFB
93436 Lompoc
93460 Santa Ynez
93101 Santa Barbara
93427 Buellton

Low API 1-5 Elementary Schools

Cuyama - Cuyama
Isla Vista - Goleta
El Camino- Goleta
La Patera - Goleta
Mary Buren - Guadalupe
Hapgood - Lompoc
Fillmore - Lompoc
La Honda - Lompoc
Clarence Ruth – Lompoc
Cesar Chavez – Santa Barbara
Franklin – Santa Barbara
McKinley – Santa Barbara
Harding – Santa Barbara
SB Charter – Santa Barbara
Adams – Santa Barbara
Cleveland – Santa Barbara
Alvin – Santa Maria
Fairlawn – Santa Maria
Oakley- Santa Maria
Adam- Santa Maria
Bonita – Santa Maria
Bruce – Santa Maria
Rice- Santa Maria
Tunnell – Santa Maria
Arrellanes – Santa Maria
Battles – Santa Maria
Miller – Santa Maria
Ontiveros – Santa Maria

santa barbara county
OFFICE of EARLY CARE
& EDUCATION



STAR PROJECT



STIPENDS
TRAINING
AND
RETENTION