



# S.T.A.R. PROJECT

## Entry Eligibility Declaration First Time Applicant Entry, Permit, Degree & Professional Track FY 05-06

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

All **FIRST TIME** STAR applicants wishing to apply for a FY 05-06 stipend must complete the following declaration. Please fill in your name and phone number, read and mark each statement as appropriate, indicate the program in which you work, sign and date the form. Declarations must be returned by **Friday, September 30, 2005** to the address below.

I, \_\_\_\_\_ declare that the following information is true and correct.  
Print Name

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 provided child care **for pay at least 15 hours per week** for 2 or more non-related children birth to five.  Yes  No

3. I have provided care 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 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 applying for 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 ARE NOT REQUIRED to 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** \_\_\_\_\_ **Phone #** \_\_\_\_\_

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