



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

**National Park Service (NPS)  
 Child Care Subsidy Program (CCS)  
 Certification of Custody**

\_\_\_\_\_ Printed name of NPS Employee

By completing this form, I certify that I have physical custody of the child/children for whom I am applying for a National Park Service (NPS) Child Care Subsidy Program benefit and that the child/children reside with me as the NPS Employee named above at his/her address.

_____	_____
<i>Child's Full Name</i>	<i>Date of Birth (DOB)</i>
_____	_____
<i>Child's Full Name</i>	<i>Date of Birth (DOB)</i>
_____	_____
<i>Child's Full Name</i>	<i>Date of Birth (DOB)</i>

I understand by signing this document, I am certifying that the statement above is correct. I further understand this document is not considered a "Permanent Record" for my file and that if I wish to continue to receive a NPS Child Care Subsidy Benefit, I must provide proper legal documentation to the USDA within 6 months of the date of this document. Failure to provide legal documentation to the USDA may result in the suspension of my benefit.

_____	_____
<i>Signature of Qualifying NPS Employee / Last 4 of SSN</i>	<i>Date</i>

***\*This form is not to be used in a geographical separation situation (EG: Geo Bachelor)***