

FORM C INSTRUCTIONS

TEACH Early Childhood® OHIO

Administered by OCCRRA (Ohio Child Care Resource and Referral Association)

Complete **FORM C** and send it to OCCRRA by the 10th day of the month after release time was used. All release time claims must be submitted by no later than 30 days after the end of the term. Release time is required per the terms of your contract.

Release time is taken by the scholar to attend class, study, or to meet personal needs. It is expected that release time will be taken each week of the term enrolled. Release time is an effort to assist scholars in successfully meeting the needs of career, family, and schooling.

Weekly, the scholar receives 1 hour of release time per credit hour of approved classes, up to a maximum of 6 hours. Release time may only be taken during weeks the scholar is attending approved classes (however not necessarily to attend class, time may be taken for studying or personal needs). Release time may only be taken during times when children are at your program or home. Your program must pay you your regular wage for the release time you use. Release time does not add time to your normal work schedule. If you normally work 30 hours per week and use 3 hours of release time, this means you work 27 hours that week (while being paid for 30). It does not mean your work schedule increases to 33 hours (including 3 hours of release time).

Examples:

- If the scholar is taking a two credit hour class they are eligible for 2 hours a week of paid release time.
- If the scholar is taking nine credit hours, they are eligible for 6 hours (the maximum) paid release time.
Report time under 1 hour as quarter hours (i.e., 15 min. = .25 hr; 30 min = .50 hr; 45 min. = .75 hr). Do not report time used under 15 minutes.

Program based scholars should work together with the Program Director to set up a release time schedule. Release time is reimbursed by OCCRRA to the program at the contracted rate.

Family Child Care Home scholars should set their own schedule within the scholarship guidelines. Release time is reimbursed by OCCRRA to the Family Professional scholar.

OCCRRA will reimburse at a rate of \$12.00 per hour for release time hours.

OCCRRA manages scholarship accounts so that if at all possible, scholars and center sponsors will not have to make payments to OCCRRA. The T.E.A.C.H. portion of the tuition will be computed after all financial aid has been applied. This will lower the scholar and center sponsor's portion for those scholars who receive financial aid.

For Family Child Care Providers this means:

- Your contribution toward tuition will be subtracted from your travel, book reimbursement, and first release time claim.
- You will be sent a check for the balance or an invoice if you should owe money to OCCRRA.
- You **MUST** sign the **FORM C** before submitting it to OCCRRA for processing.

For Center Sponsors this means:

- The center sponsor's contribution toward tuition will be subtracted from the first release time claim.
- The center sponsor will be sent a check for the balance or an invoice if monies are owed to OCCRRA.
- The **FORM C** **MUST** be signed by both the scholar and the center director before submitting it to OCCRRA for processing.

If you have any questions about completing this form or would like more copies, please call your counselor at (614) 396-5959. Additional copies may also be obtained from OCCRRA's website:
www.occrra.org/WorkforceDevelopment

TEACH Early Childhood® Ohio

Release Time Reimbursement Claim Form

Please return to: TEACH Early Childhood® Ohio
2469 Stelzer Road
Columbus, OH 43219
Phone: 614-396-5959, 614-396-5960 (fax)

Complete Form C and send it to OCCRRA by the 10th day of the month after release time was used. All release time claims must be submitted by no later than 30 days after the end of the term.

Scholar information

Name: [text box]

Address: [text box]

City, State, Zip: [text box]

Social Security #: [text box]

Term covered by this claim – use a separate claim form sheet for each term

Please pick one from the drop down box: Year

Release Time Claimed

Please pick one from the drop down box for Month, Year & # of hours given. Please type in number for date & total number of hours given

Table with 2 columns: Date release time actually given, # of hours off round to the nearest 1/2 hour. Includes an example row and a Total hours claimed row.

Scholar's signature _____

Counselor _____