**<Insert childcare provider’s letterhead>**

**<Insert Today's Date>**

To Whom It May Concern:

This letter confirms **<Insert Parent's or Guardian’s Name(s)>,** was/is a client **<Name of Care Provider>.** Our records show we provided childcare service(s) to **<Child's Name>** at **<Name of Care Provider>** on the following date(s) **<Insert the Date(s) service(s) was provided>**. The total cost for services provided during this period are **<Insert dollar ($) amount>.**

Our records reflect that the child’s parent or guardian during this time was **<Insert Parent's or Guardian’s Name(s)>**. Our records also reflect that the child lived at **<Street Address, City, State, Zip Code (include all addresses if necessary)>** during this time. The child’s parent's or guardian's address of record during this time was listed as **<Insert Parent's or Guardian’s Address(es)>**. Our records also confirm the child was under the age of 13, or disabled and under age 18, when services were provided.

In providing childcare service(s), we affirm that **<Name of Care Provider>** is regulated by state and/or local authorities through licensing or certification, and identify as one of the following (check all that apply):

 Child care at a day camp, summer camp, or holiday camp

 Before- or after-school child care

 Group child care center, nursery school, or preschool

 In home or family child care center

\_\_\_Other regulated care. Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Included in this letter is a copy of our organization’s state license/certificate which confirms we were/are a licensed childcare provider during the time the child received care.

Sincerely,

**<Insert Signature of School/Day Care Official>
<Insert Title of School/Day Care Official>
<Insert Phone Number of School/Day Care Official>**

**For University Use Only**

NIH NRSA Award #:

NRSA Budget Period:

Appointment Period:

Funding String:

                 (Fund–UDDS–Program Code–Account Code–Project ID)

**Guidance for NIH NRSA Fellow/Trainee regarding Childcare Provider Template Letter**

When working with your childcare provider to finalize the letter, please ensure the following:

* Ask your childcare provider to use their letterhead and input the needed information to replace the guidelines in the brackets < > and the brackets
* NIH NRSA Fellow/Trainee must be reflected as “Parent or Guardian”
* For the purposes of reimbursement, the dates childcare services were provided and associated costs, must fall within the NIH NRSA budget period and appointment period for which the childcare benefit was allocated
* Place of living (address) for child needs to match parent/guardian (fellow/trainee)
* A separate letter is required per child
* Reminder: the NIH NRSA childcare benefit provides a maximum of $2,500 per budget year to defray childcare costs