

## **SOS AAPT Childcare, Dependent Care, and Personal Assistance Grant**

The Southern Ohio Section of AAPT is offering small grants to assist those who would incur an extra expense related to childcare, other dependent care, or their own needs for personal assistance. Grants of up to \$100 are available for meeting attendees who incur extra expenses due to

- bringing children to the meeting
- leaving their children at home (e.g., extra babysitting or transportation services)
- hiring dependent care (elderly parents, adult children with disabilities, etc.)
- needing assistance at the meeting because of a disability

Applications must be received by **October 5, 2019** to be considered by the grant selection committee for a grant associated with the 2019 fall meeting. All applicants will be informed of their status no later than **October 12, 2019**. In the event that the number of requests for grants exceeds the funding available, preference will be given to applicants who explain clearly why a grant to support childcare, dependent care, or their own assistance is necessary.

### **Allowable Expenses**

- Dependent care expenses near the site of the meeting
- Extra dependent care expenses at home incurred because the primary caregiver was attending the meeting (for example, cost of a sitter)
- Expenses incurred in bringing a babysitter (or family member acting as caregiver) to the meeting or to your home to care for the child or adult
- Expenses incurred in bringing a child/dependent to a babysitter/family member
- Expenses incurred by the meeting attendee with disabilities to bring a family member/caretaker to the meeting to assist attendee

### **Not allowable**

- Meeting attendee's travel expenses to and from the meeting
- Meeting registration
- Tickets to local attractions

Applications and questions should be sent to Kathy Harper at [harper.217@osu.edu](mailto:harper.217@osu.edu)

**Application for SOS AAPT Childcare, Dependent Care, and Personal Assistance Grant**

Name: \_\_\_\_\_

School/Institution: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Describe how attending the meeting will help your professional development (e.g., giving a presentation, networking with other educators, attending a particular session on the program)

Briefly describe your needs. Include type of care needed, number of hours needed, and estimated cost. Applicants who describe most clearly why support is necessary will be given preference.

Submit this form via email to Kathy Harper at [harper.217@osu.edu](mailto:harper.217@osu.edu) by October 5, 2019. Applicants will be notified of their status by October 12, 2019.