



# Child Care Provider Rate Schedule for 2010-2011



**Community Coordinated Care for Children**  
**2675 Winkler Ave, Suite 300, Attn: SR Payments, Ft. Myers, FL 33901**

**Provider Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State ZIP:** \_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_

Please enter the **DAILY** rates for full time and part time care for each care level (age) that you serve. These rates will be used for School Readiness reimbursement purposes for the contract year 2010-2011. Rates are subject to change at the provider's request. However, a new form will be required in advance of any changes to rates.

<b>Care Level</b>	<b>Age</b>	<b><u>Daily Full Time</u> Rates 6 hrs. or more</b>	<b><u>Daily Part</u> Time Rates 3 hrs. up to 6 hrs.</b>
<b>Infant</b>	Up to 12 months		
<b>Toddler</b>	12 to 23 months		
<b>2 year old</b>	24 to 35 months		
<b>3 year old</b>	36 to 47 months		
<b>4 year old</b>	48 to 59 months		
<b>5 year old</b>	60 to 72 months (Not in school)		
<b>School Age</b>	Over 60 months (In School)		
<b>Special Needs</b>	0 to 156 months		

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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