



HOUSING AND CHILDREN'S SERVICES

For more information contact 519-255-5312

City of Windsor Employee Parent Consent Letter Emergency Child Care due to Coronavirus Outbreak (COVID-19)

During this COVID-19 outbreak the City of Windsor (the "City") and the Province of Ontario (the "Province") recognize health care and other Emergency Support Workers must continue to go to work. In order to support them with Licensed Child Care for their children, the City of Windsor- Children's Services Department is providing Licensed Child Care at approved locations throughout Windsor-Essex County. Licensed Child Care is being provided Free of Charge to those workers identified on the Province's [List of Workers Eligible for Emergency Child Care](#).

Approved Child Care Centres are required to follow existing health and safety requirements and have a plan in place should any staff, children or parents be exposed to COVID-19. The City has worked with our local Medical Officer of Health and approved Child Care Centres to ensure that additional precautionary safety measures are in place.

Parent/Guardian Name: _____

Employer: _____

Position Title: _____

Name of Eligible Child(ren)

Last Name	First Name	Date of Birth (dd/mm/yy)	Last Name	First Name	Date of Birth (dd/mm/yy)

Signature & Consent

I confirm my understanding of the following conditions for the City of Windsor's Emergency Child Care funding provision. I give consent to the City of Windsor- Children's Services Department to collect information regarding the attendance for my children listed above.

The provision of Emergency Child Care is being funded by the Ontario Provincial Government.

1. I declare that I am eligible to receive this provision as I am a current worker identified on the Province's List of Workers who are Eligible for Emergency Child Care;
2. Funding will be provided directly to the Licensed Child Care Centre for the purposes of my work and travel time;
3. I consent to the exchange of information between my employer, the City of Windsor- Children's Services Department and the Licensed Child Care Centre for the sole purpose of determining or verifying the administration of the Emergency Child Care funding;
4. I authorize consent for the Licensed Child Care Centre to provide the City of Windsor- Children's Services Department with my child(ren)'s weekly attendance; and
5. I will notify the City of Windsor- Children's Services Department and not send my child(ren) if either my child(ren) or myself has COVID-19 symptoms.

Signature: _____

Date: _____

Print Name: _____

Notice with Respect to the Collection of Personal Information, (Freedom of Information and Protection of Privacy Act)
(Municipal Freedom of Information and Protection of Privacy Act)

This information is collected in accordance with The Child Care and Early Years Act, 2014 and will be used for the purpose of administering the City of Windsor's, Children's Services Program.



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EMERGENCY SUPPORT WORKERS APPLICATION FORM

Application Name:	
Address:	
Home Phone #:	Cell Phone #:
Email Address:	
Employer:	Job Title:

Current Shifts Worked:

Possibility to work
Overtime:

Name of Eligible Child(ren)					
Last Name	First Name	Date of Birth (dd/mm/yy)	Last Name	First Name	Date of Birth (dd/mm/yy)

Preferred Child Care Location:

Days Required for Child Care:

(Use an X to indicate days of need)

Mon	Tues	Wed	Thurs	Fri	Sat	Sun

Additional Information (Special Needs/ Dietary Requirements)

Office Use Only:
Name of Child Care Centre to be used:
Name of Person Recording Information:
Date Information Was Recorded: