

ASSOCIATION OF VILLAGE COUNCIL PRESIDENTS

Thaddeus Tikiun Jr., Chairperson | Vivian Korthuis, CEO | AVCP.org



AVCP Child Care Renewal Application

1. Submit a completed application with required documents to our office. You can submit these documents scan/email, fax or mail to our main office. Applications are not considered complete and will not be processed until all documents are received.

Renewal Check off List

Please be sure to include items listed below when you submit your renewal application. Additional documents may be requested on a case by case bases.

- Fully Completed renewal application (form enclosed)
- Verification of ALL income (both earned and unearned) received in the past 3 months by all household members.
- Verification of any reported changes
- Updated immunization for all child(ren) needing Child Care Services

2. A completed application, which includes all supporting documents will be processed within 30 business days.
3. If all supporting documents are NOT included with initial submission, you will be notified and given a due date to submit all missing information. Please respond to this notice as soon as possible. If all requested documents are not received by the due date, your application will be denied.

If you need assistance in completing these forms, please contact the specialist for your unit or contact:

Aanii Anaver aanaver@avcp.org 907-543-7435

Sharon Alexie salexie1@avcp.org 907-543-7436

Kyle Koester kkoester@avcp.org 907-5437437

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Child Care Department

101 A Main St., PO Box 219, Bethel, AK 99559 | T 907.543.7319 | F 907.543.4261

You must complete and return this form in order to receive continued authorizations for Child Care Services.

1. Parent Information

Applicant:	Date of Birth:
Mailing Address:	Telephone Number:
City, State, Zip Code:	Message Number:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Email Address:

2. Family Information-please list all household members below. Please check if child(ren) that will be continued with Child Care Services.

Name	Date of Birth	Relationship	Occupation / School days	Child Care Services Days	Child Care Time days
1.		Self			
2.		Spouse / Sig. Other			
3.		Child			
4.		Child			
5.		Child			
6.		Child			
7.		Child			
8.		Child			

3. Report Changes-If there are any changes from your original Child Care Parent information, please check off one of the boxes.

- ☐ I have changes or upcoming changes that have not yet reported (employment status, household size, marital status, custody, provider, etc.)
- ☐ My Child(ren) Care times has changed (out of school)
- ☐ I do not have changes to report

Please detail changes below. You may be asked to provide additional verification of changes reported.

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CERTIFICATION STATEMENT

I hereby certify that the information provided herewith is true to the best of my knowledge. I understand that I am subject to immediate termination if I am found ineligible after enrollment.

I further understand that if I deliberately falsify information on this application, I may be prosecuted for fraud and/or perjury.

Parent (s) Signature:

Parent Name Print

Parent Signature

Date

Parent Name Print

Parent Signature

Date