

Date Rec: _____

Rec By: _____

Change Form

ASUO Child Care Subsidy

NAME: _____ STUDENT ID#: _____

SPOUSE NAME (if applicable): _____

E-MAIL ADDRESS: _____

MODIFICATION OF STATUS:

Please update only the information that has changed. Thank you!

New Home Address

Street/Box #: _____

City: _____ State: _____ Zip Code: _____

New Phone Number

Home Phone: _____ 2nd Phone (optional): _____

New Marital Status

Married: _____ Single: _____ Domestic Partnership: _____

Additional Dependents

Child's Name: _____ SSN: _____ Birth Date: _____

Child's Name: _____ SSN: _____ Birth Date: _____

Change of Income

Increase: _____ Decrease: _____ New monthly income: _____

Start Date: _____ Source of Change: _____

New Student Status

Undergrad: _____ Grad: _____ Law Student: _____

New E-mail Address

New E-mail Address: _____

Other

Supporting documentation of any changes is required.

Child Care Subsidy
ASUO Executive Office EMU Suite 4
1228 University of Oregon, Eugene OR, 97403-1228
ph: (541) 346-3724 fax: (541) 346-0620
email: subsidy@uoregon.edu website: <http://www.uoregon.edu/~ccsub>