



State of New Jersey

PHILIP D. MURPHY
Governor

DEPARTMENT OF HUMAN SERVICES
DIVISION OF FAMILY DEVELOPMENT
PO BOX 716
TRENTON, NJ 08625-0716

CAROLE JOHNSON
Commissioner

SHEILA Y. OLIVER
Lt. Governor

NATASHA JOHNSON
Assistant Commissioner

NJ CHILD CARE SUBSIDY PROGRAM
IVR System Contact Update Form

Case ID Number:

Parent/Applicant First / Last Name:

Telephone number to link this card to: Phone Type: Landline Cell Phone

Applicant Families First Card or E-Child Care ID Number (16 Digit):

Check Box if a new or replacement card is needed

Parent E-mail:

Co-Parent/Applicant First / Last Name:

Telephone number to link the card to: Phone Type: Landline Cell Phone

Co- Applicant Family First Card or E-Child Care ID Number (16 Digit):

Check Box if a new or replacement card is needed

Instructions: Only three Family First Cards can be issued per Family. Applicant plus two other individuals over 18 years old authorized to pick up and drop off children (Designee is optional)

Designee (Alternate) First / Last Name: D.O.B.

Primary Telephone Number:

Designee Family First Card or E-Child Care ID Number (16 Digit):

Check Box if a new or replacement card is needed

NOTE: A Second Designee can be added if there is no Co-Applicant

Designee (Alternate) First / Last Name: D.O.B.

Primary Telephone Number:

Designee Family First Card or E-Child Care ID Number (16 Digit):

Check Box if a new or replacement card is needed

Policy

- The above authorized user number is authorized to check your children in and out of care
- Under no circumstances can the child care provider or the child care provider staff be identified as a designee or have access to your card or pin number.
- Designees will be required to follow the same E-Child Care program rules.

Parent /Applicant Signature:

Date:

Co-Applicant/Applicant Signature:

Date:

Please Return this Form to Your Child Care Resource & Referral Agency:

*Community Coordinated Child Care of Union County
2 City Hall Plaza 3rd floor
Rahway NJ, 07065*