



Margaret Shadick Cyert Center for Early Education  
2011-12 Tuition Benefits Worksheet and Application

**This benefits application may only be used for children for whom enrollment in the Cyert Center has been offered by the Center and accepted by the parent. There is a 2 child lifetime benefit limit per family.**

Completed benefit applications should be returned to Carnegie Mellon Human Resources/Benefits & Compensation within two weeks of receipt of this memo (no later than June 1, 2011 for the 2011-2012 contract year). **Any applications received after June 1, 2011 will be processed, but benefits will become effective September 1, 2011 or the first day of the month following receipt, whichever is later.** If you are completing this application for benefits at the Cyert Center outside the start of the 2011-2012 contract year, benefits, if approved, will become effective the first of the month in accordance with your child's enrollment into the Cyert Center.

**NOTE:** Human Resources will return the Cyert Center Benefits Approval to you upon processing this application. The approval will specify the benefit amount for which you qualify and the total monthly fee you will be charged. Please contact the Benefits Office at (412) 268-2047 with any questions.

**DOCUMENTATION CHECK LIST:** To apply, each applicant must submit (if applicable):

- This signed completed application;
- A copy of your signed 2010 1040 or 1040A federal income tax return (use Line 7 Wages, Salaries, Tips, etc.)
- Copies of your and your spouse's 2010 W-2 (not required if you & your spouse are Carnegie Mellon employees);
- Copies of your spouse's recent paycheck stubs (not required if your spouse is a Carnegie Mellon employee), or
- If spouse is self-employed, documentation of his/her income

You will be contacted if additional information is needed. All information you provide will be kept confidential.

**Step 1. Employee Information**

**Applying Parent (must be Carnegie Mellon employee)**

Last Name		First Name	
Campus Phone & Department Name		E-mail Address	

**Is Other Parent Also a Carnegie Mellon Employee?**  Yes  No IF YES, please provide the following:

Last Name		First Name	
Campus Phone & Department Name		E-mail Address	

**Step 2. Family Gross Income Information**

**Total Gross Family Income:** \$ \_\_\_\_\_ (If using total gross family income from another source than Line 7 of your 2010 1040 or 1040A, please show me how you derived at that total.)

In determining your annual total gross family income, keep in mind the following:

- If your current annual income varies by more than 10% (plus or minus) from your total gross income as listed on your 2010 1040 or 1040A income tax return, use your current gross annual income in this calculation.
- Individuals who had pre-tax benefit contributions, if your reported income excludes pre-tax contributions to other benefit plans (e.g. health or dependent care spending accounts or tax deferred retirement plan contributions), then the pre-tax contributions will be added back into your annual salary in order to calculate your eligibility for the sliding scale benefit. If you had pre-tax contributions in 2010 and your monthly income did not change by more than 10% between 2010 and 2011, use the figure in "state wages" on the W-2 as your total gross family income. If you had pre-tax contributions in 2010 and your monthly income changed by more than 10% between 2010 and 2011, annualize your current gross monthly income to determine the total gross family income for this application.
- If you are submitting this application due to a 10% or greater change in monthly income, please return this signed form along with documentation providing proof of your change in income to: HR/Benefits & Compensation, 319 South Craig Street.

### Step 3: Child Enrollment Information

#### Child 1

First Name	Last Name
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Was this child previously enrolled at the Cyert Center in 2010-11 program year?  Yes  No

#### Please check program room and enrollment level at which this child will be attending:

- Infant Wing:**  Full Time @ \$1,587/mo
- Young Toddler:**  Full Time @ \$1,455/mo  3-Day @ \$919/mo\*  2-Day @ \$678/mo\*
- Older Toddler:**  Full Time @ \$1,455/mo  3-Day @ \$919/mo\*  2-Day @ \$678/mo\*
- Preschool-I:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*
- Preschool-II:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*
- Pre-Kindergarten:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*

\*3- and 2-day enrollments will have the sliding scale prorated.

#### Child 2

First Name	Last Name
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Was this child previously enrolled at the Cyert Center in 2010-11 program year?  Yes  No

#### Please check program room and enrollment level at which this child will be attending:

- Infant Wing:**  Full Time @ \$1,587/mo
- Young Toddler:**  Full Time @ \$1,455/mo  3-Day @ \$919/mo\*  2-Day @ \$678/mo\*
- Older Toddler:**  Full Time @ \$1,455/mo  3-Day @ \$919/mo\*  2-Day @ \$678/mo\*
- Preschool-I:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*
- Preschool-II:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*
- Pre-Kindergarten:**  Full Time @ \$1,283/mo  3-Day @ \$814/mo\*  2-Day @ \$602/mo\*

\*3- and 2-day enrollments will have the sliding scale prorated.

#### Employee's Acknowledgment

I certify that the answers provided by me herein and the material provided as required proof are true and correct to the best of my knowledge and belief. I further affirm that I have not knowingly withheld any facts or circumstances that would detrimentally affect this application.

Applicant's signature	Date
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**Mail to:** Carnegie Mellon HR/Benefits & Compensation, 319 South Craig Street

**Fax to:** 412/268-7472