

## Application for the 2026 – 2027 Program Year

Part 1. Graduate Student Applicant Information		
Last Name	First Name	Andrew ID
Phone Number		Email Address
Part 2a. Child 1 Information		
First and Last Name		Enrollment start date or enrollment change date for the 2026-2027 program year
Classroom (age group)		Days per Week
Other Parents		Andrew IDs associated with other parents
Part 2b. Child 2 Information		
First and Last Name		Enrollment start date or enrollment change date for the 2026-2027 program year
Classroom (age group)		Days per week
Other Parents		Andrew IDs associated with other parents
Part 3. Eligibility Certification		
<p>1. I am (or will be) enrolled in at least 19 units as a graduate student at Carnegie Mellon University on the Pittsburgh campus and in good academic standing.  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>2. My child(ren) has been offered enrollment or is enrolled in the Cyert Center.  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>3. My child(ren) meets IRS dependency exemption criteria.  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>4. I am <b>not</b> a full-time, benefits-eligible employee of CMU.  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>		

**Part 4. Family Income**

Please provide the amount of your (and, if you are married, your spouse's) adjusted gross income for the prior calendar year (e.g., Line 11 of your Form 1040). If married/filing separately, please include the adjusted gross income for both you and your spouse. \$ \_\_\_\_\_

**Part 5. Graduate Student Certification and Agreement**

I certify that all information provided in this application is true and correct. I further certify that I meet the eligibility requirements for the Cyert Center Graduate Student Child Care Grant as outlined above. I agree to notify the CMU HR Family Care team promptly in the event that I no longer meet the eligibility requirements for the Cyert Center Graduate Student Child Care Grant as outlined above or if I become aware that any information in this Application is no longer true and correct. I acknowledge and agree that Carnegie Mellon reserves the right to require evidence of eligibility and family income, as determined by Carnegie Mellon.

Graduate Student Signature

Date

See the [Cyert Center Graduate Student Child Care Grant page](#) for program details, including eligibility requirements and grant payment information.

Please submit applications and questions to [hrfamilycare@andrew.cmu.edu](mailto:hrfamilycare@andrew.cmu.edu)