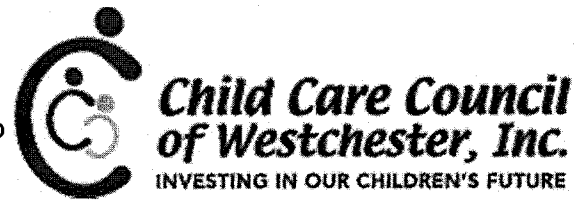


**Families feel the pinch of paying for child care.**

Please continue only if you are a Westchester resident who has a child aged 12 or under. If your children are currently in child care, if you are looking for child care, or if you have used child care in the past, we want to hear from you. The information we gather will be used to help the Council serve families better.



**All survey participants will be entered to win \$100 AMEX gift card.**  
**FAX: 914.886-0281 / Email: nicolem@cccwny.org/ONLINE: childcarewestchester.org /**  
**MAIL: 313 Central Park Avenue, Scarsdale, NY 10583**

What Zip Code do you live in: \_\_\_\_\_

What is your family size? \_\_\_\_\_

(Only include the parents and children who live in the house.)

Are your children currently in child care?

- Yes  No

How did you find your child care?

- Internet
- Friend
- Family
- Child Care Council
- DSS
- Other: \_\_\_\_\_

In the past 6 months, have you had trouble paying for child care?

- Always  Sometimes  Never  
 Often  Rarely

What is your family composition?

- Mother, single, working
- Mother, single, not working
- Father, single, working
- Father, single, not working
- Two parent, both working
- Two parent, both not working
- Two parent, one working, one not working

**In order to pay for child care in the past 6 months, did you need to : (Check all that apply)**

Borrow money from family	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Borrow money from friends	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Use credit cards because you did not have money to pay	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Cut back on basic household spending (food, utilities)	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Cut back your hours at work	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Cut back the hours your child attends child care	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Remove your child from regulated care to use informal child care (friends, relatives, etc.)	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Switch your child care provider for less expensive child care	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
Use a "patchwork" to keep cost down (i.e. use child care one day, family member the next, friend the next, etc.)	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never
None of the above	<input type="checkbox"/> always	<input type="checkbox"/> often	<input type="checkbox"/> sometimes	<input type="checkbox"/> rarely	<input type="checkbox"/> never

The Child Care Council of Westchester, Inc. is a non-profit organization serving parents, employers, and child care providers in Westchester County. It is a resource and referral agency that champions the healthy development of children, families and our community by promoting quality early care and education.

**Child Care Council of Westchester, Inc. 313 Central Park Ave, Scarsdale NY 10583 | 914-761-3456 | childcarewestchester.org**

## ONLY ANSWER IN YOUR CHILD'S AGE GROUP

Answer the following only if you have an  
Infant age 0-17 months:

Where is/has your infant been cared for in  
the past 6 months? (check all that apply)

- Child care center
- Licensed/registered family child care home
- Head Start
- Nanny/babysitter in your home
- Care by parent
- Care by relative
- Care by friend/neighbor
- I am currently seeking care
- Not applicable
- Other: \_\_\_\_\_

How much do you pay a week for  
your infant's child care? \_\_\_\_\_

Answer the following only if you have a  
Toddler age 18 - 35 months:

Where is/has your toddler been cared for in the  
past 6 months? (check all that apply)

- Child care center
- Licensed/registered family child care home
- Nursery school
- Head Start
- Nanny/babysitter in your home
- Care by parent
- Care by relative
- Care by friend/neighbor
- I am currently seeking care
- Not applicable
- Other: \_\_\_\_\_

How much do you pay a week for  
your toddler's child care? \_\_\_\_\_

Answer the following only if you have a  
Preschooler age 3 – 5 years:

Where is/has your preschooler been cared for  
in the past 6 months? (check all that apply)

- Child care center
- Licensed/registered family child care home
- School age child care
- Nursery school
- Part day Preschool
- Head Start
- Nanny/babysitter in your home
- Care by parent
- Care by relative
- Care by friend/neighbor
- My child takes care of him/herself
- Library, after school
- Camp
- I am currently seeking care
- Not applicable
- Other: \_\_\_\_\_

How much do you pay a week for your  
preschooler's child care? \_\_\_\_\_

Answer the following only if you have a School-aged  
child(ren) age Kindergarten to 9<sup>th</sup> grades:

Where is/has your school-aged child(ren) been cared  
for in the past 6 months? (check all that apply)

- Child care center
- Licensed/registered family child care home
- School age child care
- Nursery school
- Part day Preschool
- Head Start
- Nanny/babysitter in your home
- Care by parent
- Care by relative
- Care by friend/neighbor
- My child takes care of him/herself
- Library, after school
- Camp
- I am currently seeking care
- Not applicable
- Other: \_\_\_\_\_

How much do you pay a week for your  
school-ager's child care? \_\_\_\_\_

**What are the top 5 reasons you chose your child care arrangements? ONLY Check 5**

- |  |   |
|--|---|
| <input type="checkbox"/> Quality                             | <input type="checkbox"/> Caregiver is trained or educated           |
| <input type="checkbox"/> Location                            | <input type="checkbox"/> Caregiver is knowledgeable                 |
| <input type="checkbox"/> Hours                               | <input type="checkbox"/> How you were treated at time of visit      |
| <input type="checkbox"/> Cost                                | <input type="checkbox"/> Heard good things from other parents       |
| <input type="checkbox"/> Caregiver is a relative             | <input type="checkbox"/> Activities offered to children             |
| <input type="checkbox"/> Children happy in program           | <input type="checkbox"/> My other child used this program           |
| <input type="checkbox"/> Small number of children per adult  | <input type="checkbox"/> Provider has experience with special needs |
| <input type="checkbox"/> Accepted Subsidy                    | <input type="checkbox"/> Program is nationally accredited           |
| <input type="checkbox"/> A good learning/educational program | <input type="checkbox"/> Other _____                                |

**What is your total household income?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> No income           | <input type="checkbox"/> \$80,001 - \$90,000   | <input type="checkbox"/> I do not want to answer |
| <input type="checkbox"/> Less than \$32,000  | <input type="checkbox"/> \$90,001 - \$100,000  |  |
| <input type="checkbox"/> \$32,001 - \$40,000 | <input type="checkbox"/> \$100,001 - \$150,000 |  |
| <input type="checkbox"/> \$40,001 - \$50,000 | <input type="checkbox"/> \$150,001 - \$250,000 |  |
| <input type="checkbox"/> \$50,001 - \$60,000 | <input type="checkbox"/> \$250,001 - \$350,000 |  |
| <input type="checkbox"/> \$60,001 - \$70,000 | <input type="checkbox"/> \$350,001 - \$500,000 |  |
| <input type="checkbox"/> \$70,001 - \$80,000 | <input type="checkbox"/> \$500,001 or more     |  |

**Tell us what you would do if cost was not a factor :**

- |  |   |
|--|---|
| <input type="checkbox"/> I would keep my child's current child care arrangements | <input type="checkbox"/> I would place my child in regulated care |
| <input type="checkbox"/> I would look for something of higher quality            | <input type="checkbox"/> Other _____                              |

**Do you currently receive child care subsidy through the Department of Social Services ?**

- Yes                                       No                                       Not applicable

**If yes, are you having difficulty paying your family share fee ?**

- Yes                                       No                                       Not applicable

**Is/was child care an important part of your decision to work where you do?**

- Yes  
 No

**How many days of work did you miss in the past 12 months due to child care issues? \_\_\_\_\_**

**Approximately how many times per month do you arrive late to work or leave early due to child care issues? \_\_\_\_\_**

**In the past year, have child care issues caused you to....**

- Call out of work
- Feel distracted while at work
- Feel unproductive while at work
- Leave work early
- Arrive to work late
- Cut back on work hours
- Quit your job
- Lose your job
- Other \_\_\_\_\_

**Which child care issues have impacted your job in the last year (i.e. missed work, late, lost or left job, etc)?**

- My child care was not always reliable
- I am not always able to pay for child care
- Sometimes I worried that my child was not safe
- Sometimes I worried that my child was not receiving the best care
- I did not have someone to watch my child while I'm at work
- I did not have any child care issues impact my job

**Does your employer offer:**

- Work from home when your child is sick or off from school
- Dependent Care Assistance Program (DCAP)
- Resources to find child care
- Financial assistance to pay for child care
- Child care at your work site
- Extended maternity leave
- Paternity leave (for fathers)
- Other \_\_\_\_\_

**Enter a valid email or telephone number to be added into the drawing for a \$100 gift card!**

**Your contact information will be kept**

**Confidential.**

**Have you taken any of the following actions specifically because of child care?**

- Turned down a job opportunity
- Chosen a specific job
- Left a job
- Reduced working hours
- Delayed returning to work

**Name (optional)**

**Email:**

**Phone #:**