

GUIDANCE

How do I request reimbursement as part of SSCA if I already paid for my child to receive additional services or participate in other programs?

Step 1: Review and fill out the reimbursement affidavit below. .

Step 2: Save or take a picture of the completed affidavit.

Step 3: Collect the proof of payment. This can be a receipt for the services your child received, a bank or credit card statement, or some other documentation of payment for services provided to your child. Redact, cross out, or black out any account numbers or other private information and then scan or take a picture of your proof of payment.

Step 4: Email the reimbursement affidavit and the proof of payment to <u>ssca@cps.edu</u>.

*To learn more about what you can be reimbursed for, see here.

| AFFIDAVIT Parent/Guardian: | | | | |
|--|------------------|--|---------------------------------|--|
| l affirm that I hired | | | | |
| | [type of | services] services to | [child's name]. | |
| [vendor of parent's choice] provided services from | | | | |
| | [date] to | o[date]. The total amountl paid for these services | | |
| was | [cost]. | | | |
| My receipt, bank or attached to this affic | | ment, or other proof of payment fo | or the services stated above is | |
| Parent/Guardian sig | nature | Date | - | |
| After this request is | processed, paym | nent by check should be mailed to: | [address] | |
| Street address | | City, State | Zip code | |