

## **RELEASE OF INFORMATION**

l,	hereby give permission for the Care 4 Kids
(Name of Care 4 Kids Program Appli	icant)
Program and the Connecticut Office of	f Early Childhood to give information about my
application for Care 4 Kids child care	subsidy to
(Name of organization or staff member)	
This permission to release information lates;	shall be effective until the earlier of the following two
1. The date the Care 4 Kids Prog	ram or the Connecticut Office of Early
Childhood takes final action of	on my application; or
2. The date I let Care 4 Kids known	ow in writing that I no longer want them to
release any information to	
	(Name of organization or staff member)
Applicant Signature:	Data
	Date: e 4 Kids Applicant)
(Signature of curt	- man pproduct
Other Signature:	Date:
	ult living with you (i.e. spouse, child's other parent, etc.)