

Benefit Eligible MercyOne/Trinity Health Colleague Rate Sheet

* **Benefit eligible is any MercyOne/Trinity Health colleague who is budgeted to work 32 hours or more per pay period.**

Your child _____ will be with _____ (teacher) in the _____ room.

Full time = 32+ hrs. per child, per pay period
Part time= less than 32 hrs. per child, per pay period
 FT/PT rates are automatically adjusted each pay period based on hours attended.

There will be 15-hour minimum charge per pay period for all Rooms.

\$55.00/annual enrollment fee/per child	
Violet, Blue, Indigo and *Green Rooms (1:4 ratio):	Full Time \$5.52/hour Part Time \$6.68/hour
Yellow, Teal, Orange, and *Green Rooms (1:6 ratio):	Full Time \$5.05/hour Part Time \$5.72/hour
Red Rooms:	Full Time \$4.77/hour Part Time \$5.28/hour
*Ratio changes from 1:4 to 1:6 when all children in the room are 2 years old.	

Discounts:

- ALL rates above are discounted off the Non-MercyOne/Trinity Health, Non-Benefit eligible colleague rates.
- Benefit eligible Full time and Part Time MercyOne/Trinity Health colleague may apply for discounted rates by completing a Tuition Assistance application located online.
- A 5% discount will apply to families with 2 or more children who attend bi-weekly, year-round.
- All diapers, wipes, formula, and meals are included in the price.

Please initial **ALL** appropriate statements below.

_____ I understand that there will be an annual enrollment fee charged every August/September, as described above. There are no refunds either partial or complete for this enrollment fee.

_____ If applicable, I authorize Mercy to payroll deduct all childcare expenses at the above indicated rates.

Signature

Employee ID #

Date