

IRS Section 125 Qualifying Event Checklist

-Dependent Care Only-

CWID# _____ - _____ - _____ Employee Name: _____ Date: _____

**ALL CHANGES ARE EFFECTIVE THE FIRST OF THE FOLLOWING MONTH AND
CHANGES REQUESTED MUST BE SUBMITTED WITHIN 30 DAYS OF THE QUALIFYING EVENT**

THE FOLLOWING MUST BE COMPLETED:

This Qualifying Life Event must be **consistent** with the request to add, drop, or make a change that affects your dependent care account. **Please explain the qualifying event(s) and describe how the requested change is consistent with the event(s):**

(Example: Changed daycares, new daycare, "Tiny Tots", has lower rates. Daily rate was \$20, now \$16.)

✓ Change	Change in Legal Marital Status	Date of Event	Name of Spouse
	Marriage (excludes common-law)		
	Divorce/Legal Separation/Annulment		
	Death of Spouse		
✓ Change	Change in Number of Dependents	Date of Event	Name of Dependent
	*Birth		
	Adoption/Placement for Adoption		
	Death		
✓ Change	Change in Daycare or Provider Expense:	Date of Change	Name of Dependent
	Change in Provider		
	Increase or Decrease in Provider Rates (unless "Provider" is a relative)		
	Someone staying home with dependent		
	Dependent beginning school		
✓ Change	Change in Status Affecting Dependent Eligibility:	Date of Change	Name of Dependent
	Ineligible due to age 13		
	Spouse or dependent (regardless of age) becomes physically or mentally incapable of self care.		
✓ Change	Change in Employment Status: (circle affected) Employee/Spouse/Dependent	Date of Change	Name of Spouse / Dependent
	Termination of Employment: Group/Employer Name: _____ Policy# _____		
	Commencement of Employment Group/Employer Name: _____ Policy# _____		
	Leave of Absence (going on or returning from)		
	Commencement of unpaid leave (LTD, LWOP, Layoff & FMLA qualifies)		
	Terminate/rehire within 30 days (re-instate original election)		

*Changes due to the birth of a child are retroactive to the date of birth, unless noted. If birth occurs the 15th of the month or before, premiums will be due the 1st of that month. If birth occurs after the 15th of the month, premiums will not be due until the 1st of the following month.

Employee Signature: _____

Your signature confirms that all statements herein are true. Documentation that authenticates these statements could be required during an audit. Refer to Title 74 Oklahoma Statutes § 1323, Fraud – Penalties