

## THE ACADEMY OF EXCELLENCE CHILD CARE APPLICATION FOR ENROLLMENT

Student Information:	Date of Birth:			Sex:		Date	Date of Enrollment:	
Full Name:								
Last Child's Physical Address	s:		First		Middl	е	Nic	kname
Primary Hours of Care:	From_			Tc	)		Days	
of the Week in Care:	M	Т	W	Th	F	Sa	Su	
Family Information:		Child L	ives With	i:				
Mother's Name:				Fa	ther's N	Name: _		
Address:								
Home Phone:				Но	me Ph	one:		
Employer:								
Address:								
Work Phone:								Cell:
Custody: Mother		Father		Во	th		C	Other
obtain emergency medic Doctor:							F	Phone:
					Phone:			
					Phone:			none:
Hospital Preference: Please list allergies, spe							concern:	
	Ciai illeui	<u></u>	letal y Het	-us, or v	Ulliel a			
			P 11.5					
Emergency Care Plan in	struction	s (it app	olicable):_					
Emergency Contacts: Child will be released on The following people will case of illness, accident cannot be reached:	l also be	contacte	ed and ar	e autho	orized t	o remov	e the child	from the facility in
Name	Addre	SS			Wo	ork#		Home#
Name	Addre	SS			Wo	ork#		Home#
Name	Addre	SS			Wo	ork#		Home#

Name	Address	Work#	Home#
Helpful Inform	ation About Child:		
	1 and 7.2, of the Child Care Fac ) and immunization record (For		
<ul> <li>Section 7.3 Care Facilit</li> </ul>	, of the Child Care Facility Hand y Brochure, "Know Your Child C	lbook, requires that parents rece Care Facility" (CF/PI 175-24), <b>or</b>	eive a copy of the Child
that parent(	, of the Family Day Care Home/ s) receive a copy of the family c ider" (CF/PI 175-28).	Large Family Child Care Home lay care home brochure, "Selec	Handbook, requires ting A Family Day Care
	, of the Child Care Facility Hand and expulsion policies used by		notified in writing of the
<ul> <li>Section 2.3 that parents care provide</li> </ul>	, of the Family Day Care Home/ s are notified in writing of the dis er.	Large Family Child Care Home ciplinary and expulsion policies	Handbook, requires used by the family day
this enrollment	below indicates that you have r form is complete and accurate. my child's records.		
Signature of Pa	arent/Guardian	 Da	te