



## APPLICATION FOR ADMISSION

Application Date \_\_\_\_\_

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Present Age \_\_\_\_\_ M/F \_\_\_\_\_

Home Address \_\_\_\_\_  
Street
City
Zip Code

We would like to attend:

	Circle Days: (1 <sup>st</sup> Choice)	(2 <sup>nd</sup> Choice)	(3 <sup>rd</sup> Choice)
___ ¼ Day (8:30-3:30)	M T W Th F	M T W Th F	M T W Th F
___ Full Time (8:30-5:30)	M T W Th F	M T W Th F	M T W Th F
___ Early Drop Off (8:00-8:30)	M T W Th F	M T W Th F	M T W Th F
___ Late Pick-Up (5:30-6:00)	M T W Th F	M T W Th F	M T W Th F

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Hours \_\_\_\_\_

E-mail \_\_\_\_\_ Cell Phone (optional) \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Hours \_\_\_\_\_

E-mail \_\_\_\_\_ Cell Phone (optional) \_\_\_\_\_

Siblings

(1) Name \_\_\_\_\_ Age \_\_\_\_ (3) Name \_\_\_\_\_ Age \_\_\_\_

(2) Name \_\_\_\_\_ Age \_\_\_\_ (4) Name \_\_\_\_\_ Age \_\_\_\_

Please check one of the following:

I/we am/are a

- Private paying family
- Voucher Applicant

(1) Does your child have any previous group experience? \_\_\_\_\_ If yes, where?

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School/Center

City

(2) Have you ever belonged to a childcare cooperative? \_\_\_\_\_

Any other cooperative? \_\_\_\_\_

If yes, describe your experience

(3) As parents, what do you expect from a childcare center (philosophy, activities, curriculum, discipline, teacher/child ratio, etc.) and particularly from a cooperative?

(4) Is there anything you would like us to know about your child?

(5) How did you hear about Bigelow?

(6) Can we share your application with other Centers in case we don't have openings? Yes \_\_\_\_ No \_\_\_\_

Please return with a \$50 non-refundable application fee

Applicants with a Child Care Voucher are exempt from the application fee.

***Bigelow strives for a diverse community of families and teachers***

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For office use only:

Application rec.: \_\_\_\_\_ Tour date: \_\_\_\_\_ Offered slot/date: \_\_\_\_\_

Orientation Date: \_\_\_\_\_ Accepted/date: Yes \_\_\_/\_\_\_\_ No \_\_\_ Reason \_\_\_\_\_

Deposit Paid: \_\_\_\_\_ Admissions Notes: \_\_\_\_\_