

Date Application received _____

White Earth Child Care
Enrollment Application

Desired starting date: _____ Birth date: _____

sex: m/f

Child's Full name: _____ Nicknames: _____

Address: _____

Mother/guardian first and last name: _____

Employer & Address: _____

Home address (if different than
child's): _____

Phone: (H) _____ (w) _____ (c) _____

Father/guardian first and last name: _____

Employer & Address: _____

Home address (if different from
child's): _____

Phone: (H) _____ (w) _____ (c) _____

Other emergency contacts

Name: _____ Relationship: _____

Address: _____

Phone: (h) _____ (w) _____ (c) _____

Name: _____ Relationship: _____

Address: _____

Phone: (h) _____ (w) _____ (c) _____

Name: _____ Relationship: _____

Address: _____

Phone: (h) _____ (w) _____ (c) _____

Authorized People who **may** drop off and sign for this child:

Name:

Name:

Name:

Un-Authorized people who **may not** pick up or sign for this child:

Name:

Name:

Name:

Please list any child care providers that you have used in the past:

Does your child have any special fears or concerns?

Please describe discipline and guidance techniques used at home and how your child responds to it:

Describe your child's emotional characteristics or temperament:

Describe your child's general health, special needs or allergies:

Eating/sleeping/toileting habits

Does your child have any food allergies? If yes, what foods:

Are there any foods that your religion/beliefs forbid eating?

How do you put your child to sleep at home & where do they sleep?

What time does your child nap and for how long?

What products do you use when diapering?

If your child is being potty trained, what method are you using?

Is there any other information about your child that would be important to share with our staff?
