

REEDLEY COLLEGE CHILD DEVELOPMENT CENTER

995 North Reed Avenue
Reedley, CA 93654
(559)638-0300 ext. 3237

WAITING LIST APPLICATION

RC CDC Returning Family? Yes No Date of Application Fall Spring Summer

PARENT INFORMATION:

Parent 1 (Applying Parent)

First Name: Last Name: Address: City: Zip: Home Phone: SS# or Student ID# Work Phone: Date of Birth: Message Phone: Relationships to Child: Email Address: Full-time student Part-time student RC Staff Member

Parent 2 (2nd parent does not need to be a student but must be listed)

First Name: Last Name: Address: City: Zip: Home Phone: SS# or Student ID# Work Phone: Date of Birth: Message Phone: Relationships to Child: Email Address: Full-time student Part-time student RC Staff Member

CHILD/CHILDREN INFORMATION: (List all children to be enrolled)

Table with 5 columns: First Name, Last Name, Date of Birth, Age, Gender. Includes rows for B/G and G/G.

Program Applying for:

Please select the program and session you are applying for. Please check all that apply.

- Infant (2 - 17 months) M-F M/W/F T/Th a.m. session (8:00 - 12:00) p.m. session (12:00 - 4:00)
Young Toddler (18 - 30 months) M-F M/W/F T/Th a.m. session (8:00 - 12:00) p.m. session (12:00 - 4:00)
Older Toddler (31 - 36 months) M-F M/W/F T/Th a.m. session (8:00 - 12:00) p.m. session (12:00 - 4:00)
Preschool (3 - 5 years) M-F M/W/F T/Th a.m. session (8:00 - 12:00) full day session (8:00 - 4:00)

Payment Information: Financial Aid Campus CalWORKs County CalWORKs Private Pay Other

Office Use Only Date Enrolled Child Care Needed Sem/Yr/ ASAP RC Verf. WL Letter Contact Dates #