

# North Avenue Day Nursery Child Care Application

**Application Date:** \_\_\_\_\_

**Guardian's Name:**

\_\_\_\_\_

**Phone:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

**E-Mail:**

\_\_\_\_\_

**Languages Spoken in the Home:**

\_\_\_\_\_

**Working:** \_\_\_\_\_ **Yes** **No** **Hours**  
**per Week:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Yes** **No** **Hours**  
**per Week:** \_\_\_\_\_

**Child's Name:**

**Date of Birth:**

\_\_\_\_\_

\_\_\_\_\_

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**Hours That Child Care is Needed:**

**Monday    Tuesday    Wednesday    Thursday    Friday**

**Start**

**End**

**Do you know of other families who are in need of child care?**

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**Application Reviewed By:** \_\_\_\_\_  
\_\_\_\_\_

**Status:**