

Stony Brook Child Care Services Admissions Application

Child's Name _____ Sex M F Today's Date _____

Desired Start Date _____ Date of Birth/Due Date _____

Anticipated Center Usage: 8:00am–6:00pm 7:30am-5:30pm 7:00am-5:00pm
(availability is limited for this shift)

Do you have any other children enrolled? Y N Other children on the waiting list? Y N

How did you hear about us? Website Campus Announcements Times Herald Parent Guide Other

	Parent/Guardian	Parent/Guardian
Name		
Home Address		
Home Phone		
Cell Phone		
Employer <small>if you are a student, please state below</small>		
Work Number		
Email Address		
SB University Employee?	<input type="checkbox"/> West Campus <input type="checkbox"/> Hospital <input type="checkbox"/> HSC	<input type="checkbox"/> West Campus <input type="checkbox"/> Hospital <input type="checkbox"/> HSC
SB University Student?	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate

Please note:

- As soon as we receive your application and processing fee, your child will be on the waiting list, and you will be notified when an opening is available. You are welcome to call to confirm receipt of your application and check on the status: **631-632-6930**
- It is your responsibility to contact the Center with any changes to your application.
- If you decline an opening, you may be maintained on the waiting list for up to one year if you choose.

**Please enclose a check or money order made out to Stony Brook Child Care Services, Inc. for payment of the \$20.00 processing fee and send along with this application to:
 Stony Brook Child Care Services, South Drive, Stony Brook, NY 11794-4000**

Parent Signature _____

Date _____