



Stony Brook Child Care Services Admissions Application

Child's Name _____ Gender M F Today's Date _____
(MM/DD/YY)

Requested Start Date _____ Date of Birth/Due Date _____
(MM/DD/YY)

Requested Schedule: 8:00am-6:00pm 7:30am-5:30pm 7:00am-5:00pm 6:30am-4:30pm
Center hours adjusted due to COVID- please inquire (availability is limited for these shifts)

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 Staller Center Ad Internet
 Did someone refer you? _____ Other _____

	Parent/Guardian	Parent/Guardian
Name		
Street Address		
City, State, Zip		
Home Phone		
Cell Phone		
Email Address		
Work Number		
Employer: SBU faculty / staff please list department.	<input type="checkbox"/> State <input type="checkbox"/> RF <input type="checkbox"/> Other _____	<input type="checkbox"/> State <input type="checkbox"/> RF <input type="checkbox"/> Other _____
SBU Students: Department / Program	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate

Gross Family Income: <10k 10k-40k 40k-70k 70k-100k 100k-130k 130k-170k 187k-200k >200k

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. **Filling out an application is not a guarantee of a start date.** You are welcome to call to confirm receipt of your application and check on the status at **631-632-6930**
- **It is your responsibility to contact the Center with any changes to your application.**
- When you are offered a placement, you may defer your start date to a later date twice. After that you will need to reapply.
- If you decline an opening or do not respond when contacted your application will be deleted.

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

Parent/Guardian Signature _____ Date _____