



State of Florida
Department of Children and Families
CHILD CARE APPLICATION FOR ENROLLMENT

Student Information: Date of Birth: ____ / ____ / ____ Sex: ____ Date of Enrollment: ____ / ____ / ____

Full Name: _____

Last First Middle Nickname

Child's Physical Address: _____

Primary Hours of Care: From To School Your
Days of the Week in Care: M T W Th F Child Attends

Meals Typically Served While in Care: Br Lunch PM Snack

Family Information: Child Lives With: _____

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

Home Phone: ____ - ____ - ____ Home Phone: ____ - ____ - ____

Employer: _____ Employer: _____

Address: _____ Address: _____

Work Phone: ____ - ____ - ____ /Cell: ____ - ____ - ____ Work Phone: ____ - ____ - ____ /Cell: ____ - ____ - ____

Custody: Mother ____ Father ____ Both ____ Other ____

Medical Information:

I hereby grant permission for the staff of this facility to contact the following medical personnel to obtain emergency medical care if warranted.

Doctor: _____ Address: _____ Phone: ____ - ____ - ____

Doctor: _____ Address: _____ Phone: ____ - ____ - ____

Dentist: _____ Address: _____ Phone: ____ - ____ - ____

Hospital Preference: _____

Please list allergies, special medical or dietary needs, or other areas of concern:

Contacts:

Child will be released only to the custodial parent or legal guardian and the persons listed below. The following people will also be contacted and are authorized to remove the child from the facility in case of illness, accident or emergency, if for some reason, the custodial parent or legal guardian cannot be reached:

Name	Address	Work#	Home#

Name	Address	Work#	Home#

Name	Address	Work#	Home#

Name	Address	Work#	Home#

Helpful Information About Child:

- Section 65C-22.006(2), F.A.C., requires a current physical examination (Form 3040) and immunization record (Form 680 or 681) within 30 days of enrollment.

- Section 402.3125(5), F.S., requires that parents receive a copy of the Child Care Facility Brochure, "Know Your Child Care Facility" (CF/PI 175-24), **or**

Section 65C-20.11(2)(c)(1), F.A.C., requires that parent(s) receive a copy of the family day care home brochure, "Selecting A Family Day Care Home Provider" (CF/PI 175-28).

- Section 65C-22.006(3)(c)2., F.A.C., requires that parents are notified in writing of the disciplinary practices used by the child care facility, **or**

Section 65C-20.010(6)(c), F.A.C., requires that a written a copy of the family day care provider's discipline policy be available for review by the parent(s).

Your signature below indicates that you have received the above items and that the information on this enrollment form is complete and accurate.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date