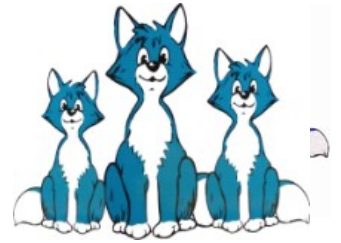


# Kleine Füchse e. V.



## Application for a place at the daycare centre

### I. Details of the child to be enrolled

\_\_\_\_\_  
Surname

\_\_\_\_\_  
First name(s)

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Nationality

\_\_\_\_\_  
Family language(s)

\_\_\_\_\_  
Sex

Brothers or sisters:

Name	Enrolled at a daycare centre	Date of birth
_____	_____	_____
_____	_____	_____

### II. Childcare required

The child should be enrolled as follows:

(Please indicate your preferences if applicable, numbering them from 1 [preferred care] to 3.)

- U3 (0 to 1 year):  45 h
- U3 (1 to 3 years):  25 h  35 h  45 h
- O3 (3 to 6 years):  35 h  45 h
- After-school care

### III. What should we know about your child?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### IV. Details of parent(s)/guardian(s)

- we are only able to process forms that contain all required information -

	Mother	Father
Surname	_____	_____
First name(s)	_____	_____
Road/street	_____	_____
Town/city	_____	_____
Telephone	_____	_____
Email	_____	_____
Nationality	_____	_____
Single parent?	<input type="checkbox"/>	<input type="checkbox"/>
Not currently employed?	<input type="checkbox"/>	<input type="checkbox"/>
	Please tick if applicable	
Employer <small>(if FZJ, state the insitute)</small>	_____	_____
Job location	_____	_____
	<input type="checkbox"/> Full-time/part-time: ____	<input type="checkbox"/> Full-time/part-time: ____
	(If part-time, please state how many hours per week)	
Return to work planned from:	_____	_____
	<input type="checkbox"/> Full-time/part-time: ____	<input type="checkbox"/> Full-time/part-time: ____
	(If part-time, please state how many hours per week)	

V. Preferred date for start of childcare: \_\_\_\_\_

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature of mother

\_\_\_\_\_  
Signature of father