



# ENROLLMENT APPLICATION

Employee's Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_ Person Number: \_\_\_\_\_

Paycheck Received From:  FHCRC  SCCA  UW  Other: (explain) \_\_\_\_\_

Department: \_\_\_\_\_ Mail Stop: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Spouse/Partner's Name (please print): \_\_\_\_\_

Spouse/Partner's Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Child's Full Name (if known): \_\_\_\_\_  
first last

Child's Date of Birth **or** Expected Date of Confinement (EDC): \_\_\_\_\_

Anticipated Enrollment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(See enrollment policy for details)

Full Time  
(5 days)

Part Time  
(2 or 3 days)

**APPLICATION FEE: \$20.00 per child**

Please return this form and the **\$20 non-refundable Application Fee**, made payable to Hutch Kids Child Care Center (mailstop HKIDS). An Enrollment Fee will be charged, to hold a placement, once an enrollment opportunity is accepted. The current non-refundable Enrollment Fee is \$200.

Amount Enclosed \$ \_\_\_\_\_ Check # \_\_\_\_\_

**Enrollment is accepted on a "first come, first served" basis. Please see Enrollment Policy.**

**HUTCH KIDS USE ONLY**

Application Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Enrollment (circle): M T W R F

Employment Verified:  Yes, \_\_\_\_\_ Classroom: \_\_\_\_\_

Note : \_\_\_\_\_