



EARLY CHILDHOOD PROGRAM APPLICATION for 2024-2025 **APPLICATION FEE: \$50.00**

Child's date of bir	th or due date __		_			
Child's Name	1 4	Final	NA: al all a		Candan	
			Middle		Gender	
Home Address	Street		City	State	Zip Code	
Parant Nama			•		•	
Home Address			Home Addr	ess	····	
Cell Phone ()_			Cell Phone (_)		
Work Phone ()		Work Phone	e ()		
Home Phone (_)		Home Pho	ne ()		
Occupation			Occupation			
Employer			Employer _			
Hours of Work			Hours of Work			
Email Address			Email Addr	ess		
Will you be an em	ployee or full-t	ime student of	f Wellesley, Bab	son or Olin in S	September 2024?	
Which College? _			Position			
Names and D.O.E	B. of Siblings _					
Do you have a ch	ild or children i	n WCCC after	school program	n?		
PLEASE NOTE: V					>	
	fixed amount cations for fina s time, WCCC	of scholarship ncial aid are re	funds from Welleviewed by the V	VCCC Scholars	each year for its ship Committee and are that are not affiliated	
Would like us to s	end you a fina	ncial aid appli	cation? Yes	No		

Child's Name
CHEDULING OPTIONS Please indicate your choice or ranked choices below. Infant and Toddler groups (3 months to 33 months as of September 1, 2024, or due date prior to august 15, 2024. 3 day and 2-day options are limited. Indicate your choice or ranked choices below. Indicate your choice your choice or ranked choices below. Indicate your choice your choice or ranked choices below. Indicate your choice
Preschool groups (2.9 by 12/31/24 through 4 years old). 4 day/3 day options are limited. days 4 days 3 days
Pre-kindergarten groups must be 4 years old as of September 1, 2024. 5 days
Preferred classroom:
Orange Room (typical pre-K) Nature Room Either Classroom
ADDITIONAL INFORMATION
low did you learn about Wellesley Community Children's Center, Inc.?
las your child had any previous experience with child care?
Vhat are your expectations of a child care program?
Ooes your child have any special strengths or needs that we should know about? Please briefly lescribe.

PLEASE NOTE

Applications for Fall 2024 will be accepted beginning **September 15, 2023**. If you want to be considered for enrollment for a subsequent year, you must file a new application.

Does your child have any allergies that require an epi-pen or other medical conditions?

Our process for application requires that we have this application on file along with a <u>non-refundable fee of \$50.00</u>, <u>check payable to WCCC</u>. We invite you to attend a virtual tour to see the Center. Please look on our website for tour dates and additional program information. Our program acceptance process will begin in mid-January 2024.

Mail to: Wellesley Community Children's Center, 106 Central Street, Wellesley, MA 02481 or Drop off: In the Blue Lock Box on the front of the ECP building (top of the hill at 50 Weston Rd, Wellesley, Ma.

Emailed applications will <u>not</u> be accepted.

STATEMENT OF NON-DISCRIMINATION

WCCC does not discriminate against any person in providing services to children and their families, or in its employment practices, on the basis of his or her race, gender, age, religion, sexual orientation, national origin, cultural heritage, political beliefs, retaliation, or marital status, except that as to the age of children, the provisions of any license issued to the corporation by any municipality of the Commonwealth shall govern the policy of the corporation. Our employment practices are consistent with the Americans with Disabilities Act.

QUESTIONS 781-235-7667 or <u>pauladolan@wcccwellesley.org</u>. Please complete one application for each applicable child.