

Stony Brook Child Care Services Admissions Application

Child's Name		Gender $\Box M \Box$	F Today's Da	
Requested Start Date		Date of Birth/D	ue Date	(MM/DD/YY)
				(MM/DD/YY)
Requested Schedule: □7:3	0am-5:30pm			
Do you have any other child	Iren enrolled? $\Box Y \Box N$	Other children of	on the waiting l	list? □Y □N
How did you hear about us?	\square Website \square Campus A	Announcements	Staller Cente	r Ad 🛛 Internet
□ Did someone refer you?		□ Other		
	Parent/Guardian		Parent/Guardia	n
Name				
Street Address				
City, State, Zip				
Home Phone				
Cell Phone				
Email Address				
Work Number				
Employer: SBU faculty / staff please list department.	□ State □ RF □ Other		State 🗆 RF	□ Other
SBU Students: Department / Program	□ Undergraduate □	Graduate 🛛	Undergraduate	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 \$25.00 processing fee and send it with this application to: Stony Brook Child Care Services, South Drive, Stony Brook, NY 11794-4000