

# Application 2016/2017



Date: \_\_\_\_\_

- Summer
- Fall
- Spring

- Allergy Alert
- Food Preferences  
(Vegetarian, milk sensitivity, etc.)
- Alumni Family

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender:    Male    Female

Parent(s) Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Are you currently enrolled in college? \_\_\_\_\_  Full Time     Part Time

If yes, which college?: \_\_\_\_\_

Requesting Subsidy?:  Yes     No

Employed? \_\_\_\_\_  Full Time     Part Time (# of hours) \_\_\_\_\_

Employer: \_\_\_\_\_

	Morning Session (8:30 12:30)		Full Day (7:30 6:00)
	Monday through Friday		Monday through Friday
	Monday, Wednesday and Friday		Monday, Wednesday and Friday
	Tuesday and Thursday		Tuesday and Thursday

Please contact Anne Horgan at 408 741-2152 or [Anne.Horgan@westvalley.edu](mailto:Anne.Horgan@westvalley.edu) if you have any questions  
West Valley College Child Development Center; 14000 Fruitvale Avenue, Saratoga, CA 95070