



**Little Eagles and Ravens Nest (LEARN) Child Care Center**

8001 Glacier Highway Avenue, Suite 1 • Juneau, Alaska 99801

Work: (907) 463-7776 • Email: LEARNJuneau@ccthita-nsn.gov

Date Received (Office Use Only): \_\_\_\_\_

Waitlist added to (Office Use Only): \_\_\_\_\_

Siblings Applied: Yes or No Age: \_\_\_\_\_

### Child Care Application

Welcome to Little Eagles and Ravens Nest (LEARN) Child Care! To be added to our waiting list, please complete this application and return via mail, in-person, or email. (Note: An application is required for each child you wish to enroll for child care services)

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Requested Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Full Name: \_\_\_\_\_ Child's DOB or Due Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: \_\_\_\_\_ Child Lives With: \_\_\_\_\_

Parent/Guardian is (check all that apply):

LEARN Employee       Tlingit & Haida Employee       Non-Employee

Date of Hire: \_\_\_\_\_

Family/Child receives and/or is experiencing the following (check all that apply):

PASS (State Child Care Assistance)       T&H Child Care Assistance       None  
Homelessness      TANF      Foster Care      OCS Involvement

Preferred Child Care Schedule (*LEARN is open M-F, 7:30-5:30*):

Monday: \_\_\_\_\_       Tuesday: \_\_\_\_\_       Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_       Friday: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_ Relation: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_ Relation: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Gunalchéesh / Háw'aa / Thank You**

*LEARN is an equal opportunity provider, employer, and lender.*

## **Additional Information Needed**

*We provide care for children birth - six. Some of these questions may not apply to your child at this time.*

1. Provide us with the names, ages, and school of siblings and any other children in the home.
2. What are you hoping for your child to experience at LEARN Child Care?
3. Has your child been in a child care setting before? What was your experience like? If not, has your child spent time away from you?
4. What can you tell us about your family's traditions, values and culture that will help us understand your child? What languages did your child grow up hearing/speaking?
5. Does your child have any health issues that we should be aware of?
6. Explain any major life changes your child has experienced thus far. (Example: sibling's birth, move, death, custody change, separation, etc.)
7. Where is your child at in the toilet training or diapering stage?
8. Explain your child's naptime and bedtime routine at home or in their current place of care.

9. Describe any dietary restrictions and/or allergies, eating habits (likes/dislikes) and (if applicable) bottle/nursing routines.

10. Would you like to receive information about tribal monthly kid-friendly events?

11. What are some of your child's main interests, talents and passions?

12. Describe your child's strengths and challenges.

13. Is there anything else you would like us to know about your child or family?

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_