



## School Age Child Care Wait List Application

### To Be Placed on the Wait List

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Please complete this form and mail to:

Clinton Early Learning Center, c/o Clinton Elementary School

Attn: Jo David

75 Chenango Ave

Clinton, NY 13323

OR email to:

[jdavid@clintonelc.com](mailto:jdavid@clintonelc.com)

Please enclose the \$25 reservation fee with this form. Once we receive your application we will place you on our waiting list.

The Clinton Early Learning Center (CELC) **Priority List** is as follows:

- Currently enrolled children
- Hamilton College faculty/staff
- Siblings of children currently enrolled
- Families on the waitlist
- Community members

### CHILD'S INFORMATION

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ DOB \_\_\_\_\_

### PARENT INFORMATION

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Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_ Preferred Method of Contact \_\_\_\_\_

**Enrollment Options-** Please indicate the time option and days of the week you would like your child to attend \_\_\_\_\_

7:30am-8:55am \_\_\_\_\_ M-F \_\_\_\_\_ M, W, F \_\_\_\_\_ T,Th \_\_\_\_\_

3:00pm-5:45pm \_\_\_\_\_ M-F \_\_\_\_\_ M, W, F \_\_\_\_\_ T,Th \_\_\_\_\_

When are you looking to start: \_\_\_\_\_

Once the SACC program is full, families will be put on the waiting list. When a placement becomes available, families on the waiting list will be contacted.

### OFFICE USE ONLY

Date Received \_\_\_\_\_ Classroom \_\_\_\_\_ Date Accepted \_\_\_\_\_ Date Declined \_\_\_\_\_