



Early Childhood Wait List Application

To Be Placed on the Wait List

Please complete this form and mail to:

Clinton Early Learning Center
Attn: Jo David
75 Chenango Ave
Clinton, NY 13323
OR email to:
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:

- Current Families enrolled in the program
- Hamilton College Employees
- Families on the Waiting List
- Families in the community

CHILD'S INFORMATION

Last Name _____ First Name _____ DOB _____

PARENT INFORMATION

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

7:45am-5:15pm _____ M-F _____ M, W, F _____ T,Th _____

7:45am-12:30pm _____ M-F _____ M, W, F _____ T,Th _____

When were you looking to start: _____

Once a classroom 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 _____