**Parent Learning Lab Application - LEVEL II**

*Please fill out the following information to apply for the next* ***Parent Learning Lab LEVEL I I*** *Cohort. Applications* ***must*** *be received at least* ***14 days prior to the start date .***

***Completion of LEVEL I is Required for LEVEL II***

*After I have received your Application, I will contact you to set up a time to complete your Registration.*

**Date:**

**Name:**

**Address:**

**Phone:**

**EMail:**

**Date of LEVEL I Completion and Cohort:**

**1- How many kids do you have ? (Include ages & gender)**

**2- Do any of your children have any special needs or diagnoses?** **What are they ?**

**3- Do they go to school ? (include grade they are in, any supports or service)**

**4- Who lives in the home ? ( kids, adults)**

**5- What is your marital status ?**

**6- Is there a CoParent who does not live in the home ?**

**7- Are there any other significant caretakers for your kid(s) (include relationship to your kid(s) ?**

**8- Are you employed ?** **What is your work schedule?**

**9- What are your biggest parenting difficulties or struggles right now ?**