



Requested schedule:

Complete drop off and pick up time for requested days.

Leave blank or X for days care is not requested.

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
Drop off time					
Pick up time					
Before/after school only					

Is your child **fully** potty-trained?  Yes  No If no, does your child wear:  diapers  pull-ups

Infants only, please indicate which developmental stages he/she is currently at:

- sitting supported  sitting unsupported  
 crawling  standing with assistance  standing without assistance  
 walking with assistance  walking without assistance

Additional Notes: \_\_\_\_\_

Do you have any concerns or notice any possible delays in your child's development?  Yes  No

If yes, please explain: \_\_\_\_\_

If other than English, what is the primary language spoken in your home? \_\_\_\_\_

How did you hear about our program? \_\_\_\_\_

To enroll or be placed on a waiting list, **copies of the following verifications must be submitted with this application:**

1. **Child's Birth Certificate** (cannot accept birth/hospital record)
2. **Child's Current Immunization Record**
3. **Custody Papers**, if applicable

To the best of my knowledge, all the information given on this form is correct. Incorrect information could lead to the dismissal of my child from the program. I understand participation in the program is voluntary.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Return to:

MVESC Little Farmers Academy  
1592 Fairview Rd.  
Zanesville, OH 43701

Email: Teresa Kocher at [teresa.kocher@mvesc.org](mailto:teresa.kocher@mvesc.org)