

Purdue Child Care Center Parent Registration Form

Please complete this form and return it to

Step 1: Contact Information

First: _____ Last: _____

Title: (circle one) Mrs Ms Mr Dr Not Specified

Step 2: Current Children

One of my children is already attending: Yes No

If yes, which Purdue child care center:

- Patty Jischke ECEC
- Ben and Maxine Miller
- Purdue Village Preschool
- New Center (Name TBD)

Name of current child attending:

First Name: _____ Last Name: _____

Name to be Called: _____ Birthdate of current child attending: _____

Step 3: Parent Information

Parent Affiliated with Purdue University

Purdue Affiliation

- Faculty/Staff (Benefits eligible) Part-time Student (< 8 credit hours)
- Faculty/Staff (Non-Benefits eligible) Community
- Full-time Student (> 8 credit hours)

Campus Department: _____

Campus Building: _____

Email Address: _____

Office Work Phone Number: _____

Home Primary Phone Number: _____

Home Secondary Phone Number: _____

Family Income combined (based on most recent Tax Return)*

- < \$50,000 > \$100,000 and < \$125,000
- > \$50,000 and < \$75,000 > \$125,000
- > \$75,000 and < \$100,000

*Disclosure is optional at this time; however, income verification will be required at enrollment.

Local Street Address (Family Address): _____

City, State, ZIP: _____

Step 4: Additional Parent

Type of Parent: Mother Father Guardian Stepfather Stepmother

First: _____ Last: _____

Title: (circle one) Mrs Ms Mr Dr Not Specified

Purdue Affiliation

Faculty/Staff (Benefits eligible)

Part-time Student (< 8 credit hours)

Faculty/Staff (Non-Benefits eligible)

Community

Full-time Student (> 8 credit hours)

Campus Department: _____

Campus Building: _____

Email Address: _____

Office Work Phone Number: _____

Home Primary Phone Number: _____

Home Secondary Phone Number: _____

This person lives at the 'Family Address': Yes No

If no:

Home Address: _____

City, State, Zip: _____

Step 5: Child(ren) Information

Please complete this information for each child you wish to register at a Purdue child care center. If you have more than two children to register, please copy this page as many times as needed.

Child to register:

First Name: _____ Last Name: _____

Name to be Called: _____ Gender: Male Female

Date of Birth (mm/dd/yyyy): _____

Ready to start when? _____

Register for which Purdue Child Care Center:

- Patty Jischke Early Care and Education Center
- Ben and Maxine Miller Child Development Laboratory School
- Purdue Village Preschool
- New Center (Name TBD)

Is there anything else you would like for us to know?

Additional Child to register:

First Name: _____ Last Name: _____

Name to be Called: _____ Gender: Male Female

Date of Birth (mm/dd/yyyy): _____

Ready to start when? _____

Register for which Purdue Child Care Center:

- Patty Jischke Early Care and Education Center
- Ben and Maxine Miller Child Development Laboratory School
- Purdue Village Preschool
- New Center (Name TBD)

Is there anything else you would like for us to know?