



Application form for child care services

Child's Name: _____ Date of Birth: _____

Parent: _____ Parent: _____

Are you a Cincinnati State student? Yes No Are you a Cincinnati State staff member? Yes No

Home address: _____ Zip code: _____

Email: _____ Cell #: _____

Home #: _____ Work #: _____

Child Care Needed _____
(6 wks-18 mos.) (18-36 mos.) (3-5 yrs.)

Tentative Care Requested by (date): _____ Hours needed: _____

Are you eligible for the following funding sources? Please check all that apply.

Ohio Job and Family Services Child Care Vouchers

Kentucky Child Care Assistance Program

Cincinnati Preschool Promise

CCAMPIS Grant. CS Students may contact the Parenting Resource Center for eligibility requirements.

StudentParent@cincinnatiastate.edu, 513-569-4793 ph 513-399-7473 txt

How did you hear about us?

There is a one-time non-refundable application fee of \$30.00 with this form.

This fee does NOT guarantee placement for your child(ren).

Make checks payable to Learning Grove.

This fee is waived for families receiving assistance.

For center use only:

Date received application fee: _____ Date of Tour: _____

Name on check or cash received by: _____ Check or Receipt#: _____

Learning Grove
William L. Mallory Early Learning Center
3520 Central Parkway
Cincinnati, Oh 45223

