USCG Child Development Center

Sponsor **Spouse**

_____ _____

Rank/Rate

Child/ren

Care: Immediate/Projected
circle one

_____

Name DOB

_____

Name DOB

Eligibility Status: Circle One

1. CG and DoD single, and dual active duty members.
   Evidence:

2. CG and DoD active duty with a full time working spouse.
   Evidence:

3. CG and DoD active duty with a full time student spouse.
   Evidence:

4. Any Federal civilian employee with a full time working spouse.
   Evidence:

5. CG and DoD active duty and reserve with a non-working spouse.
   Evidence:

6. CG, DHS and DoD contractors.
   Evidence:

7. Honorably discharged CG/DoD veterans with 100% disability.
   Evidence:

8. CG/DoD retirees.
   Evidence:

9. Surviving spouses and their dependents that died while on active duty.
   Evidence:

Contact Information:

Phone:_____

Email: _____

Waitlist Process:

When a new patron requests child care, the CDC will assess their needs and determine availability for care.

If care is available the new patron has **two** days to accept or decline.

If new patron declines or does not respond within the **two** days, they will be **removed** from the waitlist.

If space is not immediately available the new patron will be placed on the Immediate Care list.

WAITLIST FEE
Rec'd:_____
Amount:_____
Method:_____

_____

Sponsor's Signature Date