

USCG Child Development Center

Sponsor

First Name, Last Name, Rank/Rate

Spouse

First Name, Last Name

Child/ren

First Name, Last Name DOB

Care: Immediate/Projected Date

circle one

First Name, Last Name DOB

Full Time / Part Time

circle one

Eligibility Status: Circle One Category and One Subcategory

- A. CG active-duty personnel, CG civilian employees (paid from either appropriated or non-appropriated funds), and Public Health Services (PHS) Officers who are on active-duty orders to the CG.
- Single parents whether active duty, civilian or PHS Officers on active-duty orders to the CG.
 - Dual active duty and or married civilian employees (working outside the home) or PHS Officers on active orders to the CG.
 - Active duty, civilian, and PHS Officers on active-duty orders to the CG with a spouse actively seeking employment.
 - Active duty, civilian, or PHS Officers on active-duty orders to the CG with a spouse attending full time school (enrolled a minimum of 6 credit hours for spring and fall semesters and or 6 credit hours for summer).

Evidence:

- B. Active-duty members and civilian employees of the Armed Forces (Army, Marines, Navy, Air Force).
- Single parents whether active duty, civilian or PHS Officers on active-duty orders.
 - Dual active duty and or married civilian employees (working outside the home) or PHS Officers on active orders).
 - Active duty, civilian, and PHS Officers on active-duty orders with a spouse actively seeking employment.
 - Active duty, civilian, or PHS Officers on active-duty orders with a spouse attending full time school (enrolled a minimum of 6 credit hours for spring and fall semesters and or 6 credit hours for summer).

Evidence:

- C. Federal Employees
D. Contractors and community members

Evidence:

Evidence:

Contact Information:

Phone: _____

Email: _____

Waitlist Process:

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

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

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.

WAITLIST FEE

Rec'd: _____

Amount: _____

Method: _____

Branch: _____

Affiliation: _____

Sponsor's Signature

Date