

Date Application Received:

## White Earth Child Care & Learning Center

### Waiting List Application

**Child's Full Name:**

**Birth Date:**

**Desired Start Date:**

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**Mother/Guardian First and Last name:**

Address:

Place of Employment:

Phone:                      Work:

**Father/Guardian First and Last name:**

Address:

Place of Employment:

Phone:                                      Work:

**Payment Type:** Cash, CCAP, Scholarship, OTHER

**If you have any questions, please contact:**

**Allison Bellanger – Child Care Coordinator**

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**Phone: (218)-935-3870      Fax: 833-859-0959**