## IRSC Child Development Center Wait List Application

Date of Application:	Preferred Start Date:	
Child Information: Child's Full Name:	Date of Birth	Sex:
Is the child potty trained? %Yes %No		
(Please note that children must be potty	trained to be eligible for	our preschool program).
Sibling(s) currently attending IRSC center	er? ‰Yes ‰No	
Name of Sibling(s):		
Parent/Legal Guardian * Information: * Legal Guardian status will need to prov status.	vide appropriate docum	entation confirming relationship
Parent/Legal Guardian * Name:	Relationship:	Email:
Address:	City:	State:Zip:
Home/Cell Number:		
Parent Status: %Full Time IRSC Studer %Community %School Readiness	nt     ‰Part Time IRSC S	•
I understand that my request for enrollm further understand that my child's admiss and that my child's admiss are appropriated.  1. Vacancy in the age appropriate of the control of the child's parents, the earlier date will be control of the cont	nent is valid for one year ission date is dependent lassroom the request ne 3 and 4 year old room elopment Center cannotier start date, regardless have preference.	from the date of submission. I upon the following factors:  thold a place for my child, if s of the request date made by on, and waiting list process