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| University of Minnesota  Child Development Laboratory School  921 17th Avenue Southeast  Minneapolis, MN 55455  *telephone*: (612) 625-2273  *fax*: (612)626-3200  *email*: cdls@umn.edu | **UNIVERSITY OF MINNESOTA**  **CHILD DEVELOPMENT LABORATORY SCHOOL**  **FULL-DAY WAITING LIST APPLICATION**  Please return this form with the $75 non-refundable Waiting List Application Fee  to add your child’s name to the Waiting List | | **CENTER USE ONLY**  APP DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  SIB/PRI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  RECEIPT # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  WL DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Child’s Name** | |  | |  |
| Last (please print – your child will be listed by this name) | | First | | Middle |

|  |  |
| --- | --- |
| **Child’s Date of Birth**       Actual  Anticipated | **Preferred Start Date** |
|  | *Please enter a complete date* |

***When an opening becomes available for your child we will email or call you.***

|  |  |  |
| --- | --- | --- |
| **Parent/Guardian’s Name** |  | **Parent/Guardian’s Name** |
| **Address** |  | **Address** |
| **City, State, Zip Code** |  | **City, State, Zip Code** |
| **Home Phone** |  | **Home Phone** |
| **Work Phone** |  | **Work Phone** |
| **Cell Phone** |  | **Cell Phone** |
| **Email Address** |  | **Email Address** |

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| **University of Minnesota Affiliation: You MUST be affiliated with the U of M to enroll in the Full Day Program.** | | | | | |
|  |  | **Student** | *Major* | *(at least half-time certification of student status by Office of Registrar or letter from advisor for thesis only graduate students)* | |
|  |  | **Civil Service/Bargaining Unit** | *Department* | | *(minimum 50% paid appointment)* |
|  |  | **Faculty** | *Department* | | *(minimum 50% paid appointment)* |
|  |  | **Professional and Administrative** | *Department* | | *(minimum 50% paid appointment)* |

You may notify us any time before you are offered an opening of changes in Preferred Start Date. Please also remember to notify us of changes in your contact information. Call CDLS Front Desk Staff at (612) 625-2273, or email [cdls@umn.edu](mailto:cdls@umn.edu), to make a tour reservation or if you have any questions about this form.