

I prefer to enroll my child at:
_____ Battle Academy Site
_____ Brown Academy Site
_____ First Available

<i>FOR CENTER USE ONLY:</i> Date Received: _____ Application Fee: _____ Receipt #: _____ Received By: _____

UTC Children's Center

Application for Admission

Parent/Guardian Name: _____

Address: _____

E-Mail Address: _____ Home Phone: _____

Work/Cell Phone: Name _____ # _____ Name _____ # _____

Child's Name: _____ Birthdate/Due Date: _____

Requested start date: _____

Parent/Guardian is:

- _____ Parent/Parents serves on active duty in military
- _____ Full-time UTC Faculty, Staff, Student*
- _____ Full-time Brown/Battle Faculty, Staff*
- _____ Attendance Zone of Brown/Battle
- _____ Part-time UTC Faculty, Staff, Student*
- _____ Part-time Brown/Battle Faculty, Staff*
- _____ UTC Alumni
- _____ Downtown Employee
- _____ Other

Enrollment is desired for:
_____ Full-time (Monday-Friday)
_____ Part-time (MWF or T Th)

*Department or Grade and School
in which parent is employed:

Enclosed is a \$25.00 non-refundable application fee.

I understand this application indicates my interest in the center and does not guarantee enrollment.

Signature

PLEASE RETURN COMPLETED FORM AND APPLICATION FEE TO:

*UTC Children's Center
615 McCallie Avenue, Department 6656
Chattanooga, Tennessee 37403
Phone: Fax: 423.498.6873
Cindy Hornsby, Coordinator
cindy-hornsby@utc.edu*

Our hours of operation are 7:30-5:30 Monday through Friday.

Children's Center Use Only:

_____ _____ _____
