Sonoma State University's Children's School 1801 E. Cotati Ave. Rohnert Park, CA 94928

Phone Number: (707) 664-2230 Fax Number: (707) 664-4150

Website: http://childrens-school.sonoma.edu/ email: childrens.school@sonoma.edu

A Program of the Associated Students

Application for Early Education Services

Child's Name:		
First	Last	Birth date (Month/Day/Year)
Child's Gender: M F		
Applicant Parent's Name:		
	First	Last
Address:		
Street No.	City	Zip
Telephone: ()	() Work (or 0	C-11\
	work (or c	Cen)
E-mail Address:		
SSU STUDENT Anticipated Number of Unit	ts: Student ID #	‡ :
Anticipated Graduation Date:	Major:	Degree:
How many in family, living at home	Gross Monthly Inco	ama from all courses
	·	
SSU FACULTY/STAFF: Faculty	Staff Department:	
Which Languages does your child hear at	home?	
SEMESTER/YEAR REQUESTED	CHMMI	DD /XI/IN/FED
SEMESTER/ TEAR REQUESTED	SOWINII	ER/ WINTER
Interested in applying for: Subsidized Educ	cation	☐ Non-Subsidized Education
Subsidized spaces may be available to those who are to the Director. There are more spaces available for		
Completion of this application does not gu		
	<u> </u>	
We request a minimum schedule of three mor	nings a week from 9AM – 1	<u> 27M.</u>
Hours of Operations: M, T, W, F 7:30 am – 8	5:30 pm TH 7:30 am – 3:	:45 pm
Preferred Schedule:		
Notes:		
Office Only:	Children's School	
Received: Entered:		g:
Conv Sent / Given Rv		