

UAH Early Learning Center

Waiting List Application

Child's Date of Birth: _____ Date Application Received: _____

Child's Gender: Female _____ Male _____ Ethnicity: _____

Child's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Home Phone: (____) _____

Mother's Name: _____ Cell Phone: (____) _____

Mother's Employer: _____ Occupation: _____

Mother's Email: _____ Work Phone: (____) _____

Father's Name: _____ Cell Phone: (____) _____

Father's Employer: _____ Occupation: _____

Father's Email: _____ Work Phone: (____) _____

Reason(s) for applying to the UAH Early Learning Center: _____

How did you learn about the UAH Early Learning Center: _____

Does your child live with or been identified with a Developmental Delay? Yes _____ No _____

If yes, does your child have an: Individual Educational Plan (IEP) _____ Individual Family Service Plan (IFSP) _____
or Not Applicable _____ .

Enrollment decisions are based upon the application date, and the requirements of a model teacher-preparation classroom including, but not limited to, boy/girl ratios, age distributions, and academic/research program needs.

Your child's order on the waiting list is determined by the date on which this office receives the application. Please return the application to:

University of Alabama in Huntsville
Early Learning Center
301 Sparkman Drive
Huntsville, AL 35899
(256)48-7512