



Cari Marquez
President, Board of Directors

Melanie Santana
Executive Director

Received by: _____ Date: _____

MISSION CHILD CARE CONSORTIUM, INC.
4750 Mission Street, San Francisco, CA 94112
電話: (415) 586-6139 傳真: (415) 586-2339

非歧視政策及機會和平等教育取向。Mission Child Care Consortium, Inc. 是平等機會的僱主。中心不會基於性、性取向、性別、民族、身份、種族、血統、國籍、宗教信仰、膚色、心理狀態或身體障礙而歧視符合服務資格者。Mission Child Care Consortium, Inc. 在僱用員工方面實行不歧視和平權行動的政策，及不因性、性取向、性別、民族、身份、種族血統、國籍、宗教信仰、膚色、心理狀態或身體障礙而歧視符合資格者。

PRE-REGISTRATION FORM FOR CHILD DEVELOPMENT PROGRAM

兒童發展計劃預先申請表

If possible, please use English to answer questions, including all names and signatures.

如果可能的話，請用英文填寫您的答案，包括所有的姓名和簽名。

Date (日期): _____

Child's Name (孩子的姓名): _____

Birth Date (出生日期): _____ Sex (性別): F (女) M (男)

Father's Name (父親的姓名): _____

Home # (家庭電話號碼): _____ Cellphone # (手提電話號碼): _____ Work # (工作電話號碼): _____

Email (電子郵件): _____ Occupation (職業): _____

Mother's Name (母親的姓名): _____

Home # (家庭電話號碼): _____ Cellphone # (手提電話號碼): _____ Work # (工作電話號碼): _____

Email (電子郵件): _____ Occupation (職業): _____

Marital Status (婚姻狀況):

Single (單身) Married (已婚) Divorced (離婚) Separated (分居)

Widow (寡婦) Not Married but living together (未結婚，但共同居住)

Home Address (家庭地址): _____

Did your child attend a prior preschool/Home Day Care (您的孩子是否以前參加過學前班/家庭白天托兒)? Yes (是) No (否)

If you marked yes, please name the school and explain: (如果您選擇是，請寫學校名並解釋): _____

Has your child received an IEP/IFSP (您的孩子是否收到IEP/IFSP)? Yes (是) No (否)

In Process (處理中) If yes please provide documentation (如果是，請提供文件)

Are you in Training or School (您在培訓或上學嗎)? Yes (是) No (否)

Are you receiving Child Support (您是否收到子女撫養費)? Yes (是) No (否)

Are you receiving Food Stamp or CalFresh (您是否收到食物券/或食品印章)? Yes (是) No (否)

Is your family under, CPS (Child Protective Services) or At Risk? (您的家庭處於CPS (兒童保護服務) 或風險下嗎)? Yes (是) No (否)

Are you currently on Incapacity or considered Incapacitated (您目前是否喪失能力或被視為喪失能力)?

Yes (是) No (否)



Cari Marquez
President, Board of Directors

Melanie Santana
Executive Director

Is your family receiving AFDC, SSI or SSP (您的家庭是否收到AFDC, SSI或SSP)? Yes (是) No (否)

Medical Number (醫療號碼): _____

If you are not working or going to school are you seeking employment? (如果您不上班或上學, 您是否在尋找工作?) Yes (是) No (否)

Are you seeking permanent housing? (您在尋找永久居所嗎?) Yes (是) No (否)

Father's Employer (父親的僱主)

Employer's Address (僱主的地址)

If employed, I receive income by: Company check, Cash, or Personal check (please check what applies to you). (如果被僱用, 我通過以下方式獲得收入: 公司支票, 現金或個人支票: 請選擇適用於您的情況。)

Company Check (公司支票) Cash (現金) Personal Check (個人支票)

Mother's Employer (母親的僱主)

Employer's Address (僱主的地址)

If employed, I receive income by: Company check, Cash, or Personal check (please check what applies to you). (如果被僱用, 我通過以下方式獲得收入: 公司支票, 現金或個人支票: 請選擇適用於您的情況。)

Company Check (公司支票) Cash (現金) Personal Check (個人支票)

Other children (其他孩子)? Yes (有) No (沒有)

If yes, name/s, date/s of birth and School/s (如果是, 請寫明姓名, 出生日期和學校名):

Name (姓名)	Date of Birth(出生日期)	School (學校)

Other members of the household (其他家庭成員)?

Yes (有) No (沒有)

Name (姓名)	Relationship (關係)	Telephone (電話)



Cari Marquez
President, Board of Directors

Melanie Santana
Executive Director

--	--	--

ENROLLMENT AND ELIGIBILITY REQUIREMENTS CHECK LIST

註冊和資格需求清單

NOTE(注意): Due to the Hands-Free Policy, a child must be completely toilet-trained to be enrolled at the Mission Child Care Consortium Inc. A child needs to be able to assist him/herself in taking care of their toileting needs. Please attach a copy of the following. (基於「免用手」政策, 孩子必須完成如廁訓練才能就讀Mission Child Care Consortium Inc.。孩子需要照顧自己的如廁需求。請附上一份下列的副本。)

Yes (是) No (否)

Your child and his/her siblings Birth Certificates
(您的孩子和他/她的兄弟姐妹的出生證明)

Physician's Report Form and Most Updated Immunization Record
(身體檢查報告和最新的免疫記錄)

Proof of Residency (住址證明)

A Copy of any proof of Residency such as PG&E, Water, Cable TV, Garbage, Home Telephone, Lease Agreement (任何住址證明的副本, 如電費單/ PG&E, 水費單, 有線電視單, 垃圾單, 家庭電話單, 租約協議).

*Please see 4th page for further information on documents needed.

*請參閱第4頁, 有關所需文件的更多資料。

Father/Legal Guardian/Grandparent Signature
(父親/法定監護人/祖父母簽名)

Date
(日期)

Mother/Legal Guardian/Grandparent Signature
(母親/法定監護人/祖父母簽名)

Date
(日期)



Cari Marquez
President, Board of Directors

Melanie Santana
Executive Director