



**Butler County  
Children's Center  
Inc.**



It brings out the best in all of us.<sup>™</sup>

Office Use:

Date Received: \_\_\_\_\_

Site: \_\_\_\_\_

Funding Source: \_\_\_\_\_

**APPLICATION FOR CHILD CARE SERVICES**

Mother's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Occupation: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Work Hours: \_\_\_\_\_

Occupation: \_\_\_\_\_

Children Needing Care	Sex	Birth date	Elementary School	Grade
1.				
2.				
3.				

Hours Needing Care: \_\_\_\_\_ Date Needing Care: \_\_\_\_\_

Does your child have an identified disability? Yes \_\_\_\_\_ No \_\_\_\_\_ Please explain: \_\_\_\_\_

Does your child have an: IEP (Individual Education Plan) Yes \_\_\_\_\_ No \_\_\_\_\_  
IFSP (Individual Family Service Plan) Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have health concerns about your child? \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

\_\_\_\_\_  
**Parent's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent's Signature**

\_\_\_\_\_  
**Date**

The Butler County Children's Center, Inc. cooperates with the school district of residence, the Pennsylvania Department of Education for Pre-K Counts, the Midwestern Intermediate Unit IV and the Base Service Unit – Center for Community Resources (CCR). A parent's signature on this application gives us permission to exchange information such as name, address, telephone number, status of the application and site assignment with these agencies. If for any reason you do not want us to share this information, please indicate below.

**MAIL COMPLETED APPLICATION TO:**

**Butler County Children's Center, Inc.      139 Rieger Road      Butler, PA 16001**

**FOR MORE INFORMATION CALL LOCAL 724-283-3053 or  
TOLL FREE 866-348-6674.**

No one shall be discriminated against because of race, creed, color, national origin, age, sex, religion, mental or physical disabilities.