

Infant/Toddler Lab School at CSUSB
ENROLLMENT INFORMATION
 Fall Quarter 2009

Thank you for your interest in the Infant/Toddler Lab School at CSUSB. The Center offers full and part day care for children from 6 months through 36 months of age. We are a full cost care center. Please find attached the eligibility application. Once your completed application is submitted to our office, you will be placed on the waiting list. Please read the following information carefully before completing the application:

The attached application is **NOT** a registration form; it is an eligibility/waiting list application only. Parents will be notified by phone **ONLY** if and when a child is accepted for registration. If a child is not initially accepted, the application will remain active for the current academic quarter and notification will be made as space becomes available. **It is each parent's responsibility to notify the Center at 909-537-5661 of any changes involving telephone numbers, schedule changes, etc.**

It is also each parent's responsibility to RESUBMIT a new application for each upcoming academic quarter.

APPLICATION PROCEDURE

1. Complete the Eligibility Application. Make sure to carefully and accurately complete every item. Applications submitted with missing information will **NOT** be processed.
2. Complete a report from your child's physician and make sure to have a copy of your child's immunization records.
3. Return the completed application, physician's report, and immunization records to the Infant/Toddler Laboratory. Waiting list applications for the fall academic quarter will not be accepted until **June 8**. Applications will be accepted on an on-going basis. A new application must be submitted each quarter for the subsequent quarter. **This application is for Fall 2009 quarter only.**
4. You will be notified by telephone approximately the 2nd week of July if your child is accepted into the program. You are welcome to call the Center at any time to check on the status of your application. If your child is accepted into the program, there is an **\$85.00 initial registration fee.**
5. If the child is not yet born, you may submit an eligibility application, but it is the parents' responsibility to notify the Lab School of any changes (the child's date of birth, start date, etc.). Parents must reapply every quarter to be considered for the subsequent quarter.

Mail the completed application to: CSUSB Infant-Toddler Laboratory
 5500 University Parkway SB 145
 San Bernardino, CA 92407

Academic School Year Hours: Mon-Thurs. 7:30 a.m. – 4:00 p.m.; Fri 7:30 a.m. – 4:00 p.m.
 This does not include summer hours

Tuition Rates for Infants & Toddlers
 Effective June 2008

<u>Full Days 8 a.m.-4 p.m.</u>	CSUSB student prices	Non-CSUSB student prices
Mon-Fri	\$270/week	\$280/week
Mon-Thurs	\$220/week	\$240/week
Mon, Wed, Fri	\$180/week	\$190/week
Mon, Wed OR Tues, Thurs	\$125/week	\$135/week

Half Days (you will choose a morning schedule, afternoon schedule, or evening schedule)

Morning= 7:30 a.m.-noon; afternoon= noon-4 p.m.; evening= 4 – 8 p.m.		
Mon-Fri	\$150/week	\$155/week
Mon-Thurs	\$120/week	\$125/week
Mon, Wed, Fri	\$90/week	\$95/week
Mon, Wed OR Tues, Thurs	\$60/week	\$65/week

**Infant/Toddler Lab School at CSUSB
Eligibility Application**

Fall 2009 Quarter Only; September 24 -December 7, 2009

Please list each child for whom application is being submitted:

Child's Name _____	M/F _____	Birth Date _____	Age _____
_____	_____	_____	_____
Applicant Parent's Name _____	CSUSB Student Yes ___ No___	Faculty Yes ___ No___	Staff Yes ___ No___
Other Parent's Name _____	CSUSB Student Yes ___ No___	Faculty Yes ___ No___	Staff Yes ___ No___
Home Address _____			
Home Phone # _____		Home Phone # _____	
Email Address(es) _____			

What days/times will you need care? Please estimate as close as possible. We will use this information to determine your child's eligibility for the program.

You may choose 1 of 4 options:

a.m. program: 7:30 a.m.-noon	evening program: 4-8 p.m. (mon-thurs only)
p.m. program: noon-4 p.m.	full-day program: 8 a.m.-4 p.m.

Please select your child's desired program below. You may choose: Mon-Fri; Mon-Thurs; Mon, Wed, Fri

Monday	a.m.	p.m.	evening	full-day
Tuesday	a.m.	p.m.	evening	full-day
Wednesday	a.m.	p.m.	evening	full-day
Thursday	a.m.	p.m.	evening	full-day
Friday	a.m.	p.m.	evening	full-day

Our center hours are: Mon-Thurs 7:30 a.m.-8 p.m.; Friday 7:30 a.m.-4 p.m.

Did you apply for CCAMPIS funding? Please see <http://ccampis.csusb.edu/> for more information regarding child care grants. Yes No

Please call 909-537-7782 for more information

Comments:

"I certify that all of the above information is true and correct and that I have read and completely understand the **Enrollment Policies and Procedures** attached to the application."

Signature: _____ Date: _____

For Office Use Only	Date Received: _____
Date Family Contacted: _____	
Comments: _____	
Outcome of Call: _____	