

APPLICATION FOR ENROLLMENT
NSU
MARIE SHAW DUNN CHILD DEVELOPMENT CENTER

Child's Name: _____

Birth date: _____ Race/Ethnic Origin: _____

Male/Female: _____

Exceptionality or Special need(s): _____

Primary Contact Email Address: _____

Home Address: _____

Home Phone: _____

Father's Name: _____

Place of Employment: _____ Phone _____

Mother's Name: _____

Place of Employment: _____ Phone _____

Name of Siblings	Age of Siblings	Preschool Siblings Attended	School where sibling is Currently Enrolled

***Annual tuition of \$4900.00 and supply fee apply (subject to change)**

For Office Use Only

Updated: 08/1/2020

Date Received: _____

Staff Member: _____