I prefer to enroll my child at:
_____ Battle Academy Site
_____ Brown Academy Site
_____Lookout Street (former LMM)
_____ First Available

FOR CENTER USE ONLY:
Date Received: _____
Application Fee: _____

Receipt #: _____
Received By: _____

UTC Children's Center

Waiting List Application for Admission

Parent/Guardian Name: _____

E-Mail Address: _____ Work/Cell Phone: Name _____#_____

Name _____#_____ Child's Name: ____ _____

Birthdate/Due Date: _____ Requested start date: _____

Parent/Guardian is:
_____ Parent/Parents serves on active duty in military
_____ Full-time UTC Faculty, Staff, Student*
_____ Full-time Brown/Battle Faculty, Staff*
_____ Attendance Zone of Brown/Battle
_____ Part-time UTC Faculty, Staff, Student*
_____ Part-time Brown/Battle Faculty, Staff*
_____ UTC Alumni
_____ Downtown Employee
_____ Other

Enrollment is desired for:
_____ Full-time (Monday-Friday)
_____ Part-time (MWF or T Th)

*Department
in which parent is employed:
_____

Enclosed is a $50.00 non-refundable application fee.
I understand this application indicates my interest in the center and does not guarantee enrollment.

_____
Signature

PLEASE RETURN COMPLETED FORM AND APPLICATION FEE TO:

UTC Children's Center
615 McCallie Avenue, Department 6656
Chattanooga, Tennessee 37403
Phone: 423.498.6875
Cindy Hornsby, Coordinator
cindy-hornsby@utc.edu

Our hours of operation are 7:30-5:30 Monday through Friday.

Children's Center Use Only:
_____
_____