



Los Angeles Community College District
East Los Angeles College Campus Child Development Center
(323) 265-8788
email: CDC@ELAC.EDU



Enrollment Application

**** Please Read This Application Carefully ****

The following information is provided to determine whether or not your child/children meets the entry level requirements for this program. After reading the information, if you believe your child/children are eligible complete the attached application and email scanned copies of the required documents to CDC@ELAC.EDU or provide in-person at A1-101 bldg.

I. General Enrollment Requirements :

- **Toddler Program:** Children must be 2.0 years by June 1st of the current year.
- **Pre-school Program:** Children must be 3 to 5 years of age by September 1st of current year.
- **Kindergarten:** Children must be 5 years of age by September 1st of current year.
- ***Transitional Kindergarten:** Children must be 5 years of age between September 2nd - April 2nd
- Priority is given to:
 - 1) Child of Protective Services or children at risk.
 - 2) Full-time Students for Fall/Spring (12 units) and Winter/Summer (6 units) enrolled in the Los Angeles Community College District; maintain a 2.0 G.P.A.
 - 3) Faculty and Staff; 4) Community.
- Children must be enrolled Monday-Friday.
- Children should not be enrolled in another program at the same time.
- Verification of training and/or employment is required.

II. Requirements for Subsidized Care :

- All general requirements in Section I.
- The child must live in the State of California while services are being received.
- Gross monthly income must not exceed the income ceilings established by the State Department of Early Education Division and California Department of Social Services Child Care Division.
- Total current household income verification will be required to determine your eligibility for the State Preschool, CalWORKs, and/or General Child Care.
- Children of Protective Services.

III. Requirements for CalWORKs Participants:

- All general requirements in Section I.
Parent(s) must verify CalWORKs enrollment status.

IV. Requirements for Non-Subsidized Care:

- All general requirement in Section I.
- Student parents with the highest priority will be notified as space is available. Unsubsidized child care fees are based on a sliding fee scale approved by the Los Angeles Community College District Board of Trustees. The rate is between \$1 - \$2/per hour for students and \$3 - \$5/per hour for non-students.

Note ● ***Transitional Kindergarten:** is the first year of a two year program, offered by the California Department of Social Services Child Care Division. If your child's birthday is between September 2nd - April 2nd your child will be eligible to attend our program for two years.

This Institution is an Equal Opportunity Provider

V. A. How Did You Hear About The Child Development Center:

For research purposes, we would like to know how you found out about the Child Development Center. Please complete by marking the appropriate box in **Part VI** of the application.

B. Submitting An Application:

This application will only be accepted and processed when all ***required documents** are attached as listed below:

- **Current Verification of total household income:**
 1. TANF/CalWORKs Verification, Foster Care payments or
 2. Employment Verification (1, 2 or 4 consecutive weeks of check stubs, totaling 1 month's worth.)
 3. Unemployment and / or Disability Verification;
- **Utility Bill:** (gas, water, trash, electricity bill, or rental agreement) as proof of physical address.
- **Family Size:** Verification for all children, under the age of 18 yrs. old who are part of your household is required. (i.e. birth certificate, hospital birth record, baptismal certificate)
- **Child's Immunizations/Physician's Report:** Provide current immunization record for child/children being considered for enrollment to verify that vaccines are in compliance with the Los Angeles County Dept. of Health Services Child Care Entry Guidelines. A current child physician's report (LIC. 701 form) will be required.
- **Current Class Printout, Educational Plan, & Semester Final Grades:** If applicable, a current enrollment verification, educational plan, and final grades will be required at the time of submitting the enrollment application to establish priority for your child(ren) in the program and at the beginning of every semester to verify parent/guardian student status. ("General Requirements" section 1)

NOTE: You will be required to submit original current income verification and/or additional information during the enrollment certification & recertification process.

This Application is Contingent on State Funding for Our Program

Please Note: All Programs are Subject to Change Without Prior Notice

VI. Sessions Offered:

Each child is required to attend 5 days per week, 3.5 consecutive hours in the Morning or Afternoon Program; and 6.5 consecutive hours for the All Day Program.

Semester	Session	Age Group	Hours of Operation	Minimum Hour of Operation
Year-round	All Day	2 - 5	7:45 am - 3:30 pm Monday - Friday	8:30 am - 2:45 pm
Year-round	Morning	*3 - 5	7:45 am - 11:45 am Monday - Friday	8:30 am - 11:45 am
Fall, Winter, Spring	Afternoon (upon availability)	*3 - 5	12:00 pm - 4:00 pm Monday - Friday	12:00 pm - 3:30 pm

***Three- year olds will be accepted if there are no four-year olds on the eligibility list.**

Completing this application does not imply that your child has been accepted into the program.

Semester: _____ Year: _____

FOR OFFICE USE ONLY

Date Application Received: _____
 Staff Initials: _____
 Child Protective Services: _____
 CalWORKs: _____ Other: _____
 Income: _____ Family Size: _____
 Ranking Number: _____



Los Angeles Community College District Child Development Center
APPLICATION FOR ENROLLMENT- EAST LOS ANGELES COLLEGE
2023-2024 School Year



Please submit complete application to the Child Development Center. Completing this application does not imply that your child has been accepted into the program.

Please Note: Documentation verifying information on this application will be required for enrollment.

PART I - Child Information (For children you are applying for care only)					
#1	Last Name:	First Name:	Middle Initial:	Birthdate:	Home/Other Language Spoken:
#2	Last Name:	First Name:	Middle Initial:	Birthdate:	Home/Other Language Spoken:
#3	Last Name:	First Name:	Middle Initial:	Birthdate:	Home/Other Language Spoken:
PART II - Parent/Guardian #1 Information (Must Provide Information on All Adults in the Household)					
Last Name:		First Name:		Middle Initial:	Email address:
Street Address:			City:		Zip Code:
Home Phone:		Work Phone:		Cell Phone:	
Parent/Guardian #2 Information (Must Provide Information on All Adults in the Household)					
Last Name:		First Name:		Middle Initial:	Email address:
Street Address:			City :		Zip Code:
Home Phone:		Work Phone:		Cell Phone:	
PART III – Schedule Requested (Please Check Below)-Subject To Change					
<input type="checkbox"/> FULL DAY Preschool (3-5 yrs.old) Monday - Friday 7:45 am - 3:30 pm (min. 8:30 am - 2:45 pm)		<input type="checkbox"/> HALF DAY Morning Preschool (3-5 yrs.old) Monday - Friday 7:45am - 11:45 min (min. 8:30 am - 11:30 am)		<input type="checkbox"/> HALF DAY Afternoon Preschool (3-5 yrs.old) Monday - Friday 12:00 pm - 4:00 pm (min. 12:00 pm -3:30 pm) *upon availability	
<input type="checkbox"/> FULL DAY Toddler (2-2.11 yrs. old) Monday - Friday 7:45 am - 3:30 pm (min. 8:30 am - 2:45 pm)		<input type="checkbox"/> FULL-DAY TK/Kindergarten Monday - Friday 7:45 am - 3:30pm (min 8:30 am - 2:45 pm)			

	Parent/Guardian # 1	Parent/Guardian # 2
In School/Training		
Working		
Medically Incapacitated/Disabled		
Seeking Employment		
Homeless		
Other (Please specify):		

PART IV – For CalWORKs / TANF Participants ONLY

1.	Are you an active participant of the LACCD CalWORKs Program?	Yes:		No:	
2.	Which of the following are you receiving?	TANF: _____	CalWORKs: _____	Cal Fresh: _____	

PART V – How Did You Hear About The Child Development Center? Check All That Apply

a. **Campus Department:** Admissions: _____ CalWORKs: _____ ELAC Website: _____ Other: _____

b. **Check All that Apply:** Family or Friend: _____ Sibling Attended: _____ Resource and Referral Agency: _____

PART VI – Student Status

1. What is your vocational major/educational goal?
 Parent/Guardian #1: _____ Parent/Guardian #2: _____

Parent/Guardian #1: 12 units: _____ 11-9 units: _____ 8-4 units: _____ 3-1 units: _____ Non-Credit Courses: _____

Parent/Guardian #2: 12 units: _____ 11-9 units: _____ 8-4 units: _____ 3-1 units: _____ Non-Credit Courses: _____

2. Did you apply at this Center last year? Yes _____ No _____

3. What College/University/Vocational Center are you attending?
Parent/Guardian #1: _____ **Student ID #:** _____
Parent/Guardian # 2: _____ **Student ID #:** _____

PART VII – Family Size & Source of Income

1. Are you a single parent family? Yes: _____ No: _____

Total Number of family members? _____

List all siblings living at home: (Children ONLY)

Name:	Birthdate
1.	
2.	
3.	
4.	

Family Monthly Gross Income (Please include all sources of income)

	Parent/Guardian #1	Parent/Guardian #2	Case Number
Employment	\$	\$	
TANF/CalWORKs	\$	\$	
Unemployment	\$	\$	
Cash Aid:	\$	\$	
Cal Fresh:	\$	\$	
Other:	\$	\$	
TOTAL	\$	\$	

PART VIII - Certification

I certify to the best of my knowledge that the above statements are true. I understand that providing misleading or fraudulent information are grounds for denial and/or termination of services. I understand that I have the right to appeal the denial of my request for services.

 Parent/Guardian Signature

 Date

LOS ANGELES COMMUNITY COLLEGES DISTRICT CHILD DEVELOPMENT CENTER

Fraud Statement

This program defines fraud as an intentional misrepresentation, concealment, or nondisclosure of information for the purpose of inducing Center Staff to rely on it for determining eligibility for services.

Subsidized child development services are not an entitlement; families must meet eligibility requirements. Ultimately, the burden of proof of eligibility is on the parent, not the Center. If the parent cannot prove eligibility, the Center has no obligation to serve the family. At any step in the completion of the enrollment process or child's attendance in the program, services may be suspended, if fraud is substantiated. Documentation of fraud will be forwarded to the General Legal Council of the Los Angeles Community Colleges District (LACCD). If a family has obtained services through fraud, a payment of outstanding tuition balance is required before any future services are considered.

The Center may verify information/documentation provided by the parent.

I understand the above fraud statement and declare, under the penalty of perjury, that the information and documentation I have provided, is true and correct to the best of my knowledge. I give LACCD Child Development Center permission to verify all information provided.

Child's Name

Parent's Name

Parent's Signature

Date

Agency Representative/Director's Signature