Center for Early Childhood Education 26455 N. Rockwell Canyon Rd. Santa Clarita, CA 91355 (661) 362-3501 (661) 362-5148 FAX



Received:	

## **COLLEGE OF THE CANYONS VALENCIA AND CANYON COUNTRY CAMPUS APPLICATION FOR ADMISSION**

## • APPLICATION PROCEDURE

Registration procedure varies for COC students, those currently in the program and those on the waiting list. For additional information, please stop by the office in the Early Childhood Education Building.

## • WAIT LIST REGISTRATION

- 1. A wait list is used during the Fall and Spring semesters to fill openings as they occur.
- 2. As a courtesy, we try to reach those at the top of the list, but do not guarantee placement.

<del></del>	urs, a nonrefundable deposit wil	•			
Child's Name:		Birth date:	☐ Male ☐ Female		
Parent 1 Name		Parent 2 Name	<del></del>		
Child's <b>Address</b> :		Contact Phone Number (between	en 9am-5pm):		
City/State/Zip:		Parents living in home: Mother			
CHECK WHICH APPLIES		☐ Step-Mother☐ Step-Father	Other		
	ent(s) must be enrolled in a min	imum of 6 units. Current Officia	I school schedule must be		
submitted with this application		illinum of o units. Current Omola	i school scheddie mast be		
STUDENT - PARE	NT 1 PARENT 2	TERM:			
STAFF - Full-T	ime Faculty Full-Time Cla	assified Part-Time	OTHER:		
COMMUNITY					
ALL CLASSES ARE SUBJECT TO MINIMUM ENROLLMENT Child's age by August determines placement in Toddler & Preschool Center. Check with office for details. PRESCHOOL/TODDLERS On the chart below, mark a (1) for your first choice, (2) for your second choice, and a (3) for your third choice. Chances for enrollment					
improve when you are flexible.  SCHEDULE DESIRED: VALENCIA CANYON COUNTRY CAMPUS					
		= 5/11/5/1/5/			
TIME	M-W-F	T-TH	M THRU F		
	I	• • • • •			
8:45 A.M 11:45 A.M.					
(A.M. Session)					
*****					
(A.M. Session) 1:00 P.M. – 4:00 P.M.					
(A.M. Session)  1:00 P.M. – 4:00 P.M. (P.M. Session-PRESCHOOL)  8:00 A.M 4:00 P.M (Full-Day Session)  The following may be selected or	the day(s) of regular attendance:				
(A.M. Session)  1:00 P.M. – 4:00 P.M. (P.M. Session-PRESCHOOL)  8:00 A.M 4:00 P.M (Full-Day Session)  The following may be selected or HALF DAY:	n the day(s) of regular attendance:	FULL DAY:			
(A.M. Session)  1:00 P.M. – 4:00 P.M. (P.M. Session-PRESCHOOL)  8:00 A.M 4:00 P.M (Full-Day Session)  The following may be selected or HALF DAY: EARLY BIRDS:	the day(s) of regular attendance: 7:30 a.m 8:45 a.r	FULL DAY: n. EARLY BIRDS:	7:30 a.m. – 8:00 a.m.		
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(A.M. Session)  1:00 P.M. – 4:00 P.M. (P.M. Session-PRESCHOOL)  8:00 A.M 4:00 P.M (Full-Day Session)  The following may be selected or  HALF DAY:  EARLY BIRDS: HALF DAY AM:	7:30 a.m. – 8:45 a.r. 8:45 a.m. – 11:45 a.1:45 a.m. – 12:45 p.	FULL DAY:  n. EARLY BIRDS:  .m. FULL DAY  m. EXTENDED PM'S:	7:30 a.m. – 8:00 a.m. 8:00 a.m. – 4:00 p.m.		
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- OFFICE USE ONLY -					
Grant:	☐ CCTR	☐ CSPP FULL DAY	☐ CSPP HALF DAY		
Family Fee \$	Certific	ed Date:	<u> </u>		
Tuition:	Cash Receipt # _		<u> </u>		
	Check #		Child Start Date:		
	Amount: \$		Cash/Check Rec'd Date:		
Class Code:			_		
Authorization:			Priority Number:		