

Sunshine Early Learning Centre Oy

Pirkankatu 9 & 18

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www.sunshineearlylearning.fi

APPLICATION

This form should be either emailed or posted to Sunshine Early Learning Centre. When a place is becoming available, we will contact you and arrange a meeting.

Child's name

Social security number (Finnish) or date of birth

Home address

Guardian 1 (first name - last name)

Address

Phone number

Email:

Guardian 2 (first name - last name)

Address

Phone number

Email:

Need for daycare:

Starting from (date): _____

Full time, Monday to Friday (available 7 a.m. to 5 p.m.)

Part-time, 3 days per week (days agreed when signing the contract)

Please notice the majority of places available in our daycare centre are full-time. If there are no part-time places available, would you be interested in a full-time place?

Yes

No, we are only interested in a part-time place for our child

Child was previously taken care by (name of the daycare centre) _____

Do we have a permission to contact previous daycare for more information about your child?

Yes

No

Allergies or other important information concerning your child:

Place

Date

Guardian 1 signature

Guardian 2 signature