

**Requested Start Date:** 

## **Intercultural Child & Family Centre NorQuest**

Date Recvd: Time Recvd: Initials:

1-165, 1021508 Street Edmonton, AB T5J 1L6 Ph: (825) 777-6014 Email: Familysupport@icfc.ca

Child Waiting List Application Form (all fields must be completed for children to be placed on the waiting list)

**Termination Date:** 

Child's First Name:						Last Name:							
Home Address:								Posta	al Code:				
Birthdate (mm/dd/yyyy):													
Gender:	Male			F	emale								
Child Lives With:	Parent/Guardian					itive [			Other				
Funding Information (will you be applying for funding to help reduce your parent fees?)													
I have applied for subsidy		Yes		NO	No		I pla	I plan to apply for subsidy Yes/No					
I have applied for Norque School Bursary:	st Ye	Yes No						plan to apply for bursary Yes/No					
I have other funding:	Ye	Yes No				l p			lan to apply for other funding Yes/No				
Parent is currently a: NorQuest S				nt 🗌	NorC	uest E	mplo	oyee Community Member					r
Parent/Guardian  Parent/Guardian  First Name:  Home Phone #:	Conta	ct	Inforn	nati	Last Na		 _						
Home Address:					CCIITII	Offic #.	_	Posta	ıl Code:	Т			
Work Place:					Work F	hone #	_	. 5514					
Name of School:						School Phone #:							
Email Address:													
Parent/Guardian													
First Name:						Last Name:							
Home Phone #:					Cell Ph	one #:	_						
Home Address:							_	Posta	l Code:	$\perp$			
Work Place:					Work F		_						
Name of School:					School	Phone	: #:						
Email Address:													
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IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT JASVINDER HERAN AT 825-777-6014 OR Familysupport@icfc.ca