

## PRESCHOOL EARLY LEARNING PROGRAM (PELP) REGISTRATION FORM

Please Print Clearly					
<b>SECTION 1: APPLICANT INFORMATION</b>				CHILD'S AGE VERIFIED: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Applicant's Last Name		Applicant's First Name		Relationship to Child <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian	
Child's Last Name		Child's First Name		<input type="checkbox"/> Male <input type="checkbox"/> Female   Child's Date of Birth (dd/mm/yyyy)	
<b>SECTION 2: APPLICANT ADDRESS</b>				ADDRESS VERIFIED: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street #	Street Name:		Apt# or PO Box:	Telephone:	
City/Town:			Postal Code:	Municipality/Township:	
<b>SECTION 3: CHILD CARE INFORMATION</b>					
Name of Agency and Contact Name:		Address of Agency:		Agency Telephone:	
<b>SECTION 4: CHILD'S SCHEDULE</b>					
Child's Schedule	Monday <input type="checkbox"/> am <input type="checkbox"/> pm	Tuesday <input type="checkbox"/> am <input type="checkbox"/> pm	Wednesday <input type="checkbox"/> am <input type="checkbox"/> pm	Thursday <input type="checkbox"/> am <input type="checkbox"/> pm	Friday <input type="checkbox"/> am <input type="checkbox"/> pm
Extended Care is required: AM <input type="checkbox"/> LUNCH <input type="checkbox"/> PM <input type="checkbox"/> Not applicable <input type="checkbox"/>					
<b>SECTION 5: CONSENT TO RELEASE INFORMATION</b>					
<p>The County of Lambton Children and Social Planning Department may conduct research and evaluation. An important component of this research is to determine the effectiveness of the Early Learning Program of which your child is a participant. Permission is requested to monitor your child's development with the Ages and Stages Questionnaire which will be performed with your child annually, at a minimum. The screening can give staff and parents, as well as community partners a clearer picture of a child's strengths, weaknesses and emerging skills. Understanding your child's abilities also allows the child care centre to provide activities and learning opportunities that will encourage your child's development. Your child care agency will be using an established developmental screening tool, the Ages and Stages Questionnaire (ASQ). If your child exhibits any areas where his/her development is of concern, your child care centre will bring this to your attention immediately. You are welcome to view your child's Ages and Stages Questionnaire at any time.</p>					
<p>I, _____ provide permission for _____ Child Care Centre to:</p> <p style="text-align: center;">(Name of Parent/Guardian) <span style="margin-left: 200px;">(Name of Child Care)</span></p> <ul style="list-style-type: none"> <li>✓ Monitor my child's development using the Ages and Stages Questionnaire</li> <li>✓ Share the Ages and Stages Questionnaire results with our local Data Analysis Coordinator or designate who will compile the data anonymously for community reports and planning.</li> </ul>					
Applicant's Signature			Date		
Start Date			Discharge Date		

Collection of this information will be used to assess eligibility for PELP. You may be contacted in the future for research and evaluation purposes. If you have any questions please discuss this with your child care provider.