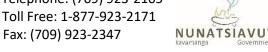
## Nunatsiavut Government – EDUCATION DIVISION



NUNATSIAVUT GOVERNMENT P.O. Box 116 Makkovik, NL AOP 1J0 Email: <a href="mailto:education@nunatsiavut.com">education@nunatsiavut.com</a>

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Telephone: (709) 923-2105 Toll Free: 1-877-923-2171



## **Childcare Request Form**

I,, confirm that	t I am enrolled in the
Program at the	.,,
I am requesting Childcare support for my child(	ren).
Number of dependents requiring childcare:	
(If requesting childcare for more than one child	
Name:	Λαο·
Type of childcare requested:	^ge
□ Registered Daycare □ Private babysitter	□ Afterschool Care
Name of Provider:	
Address:	
	Email Address:
Dates:	
From:	To:
Name:	Age:
Type of childcare requested:	
□ Registered Daycare □ Private babysitter	
Name of Provider:	Telephone #:
Address:	
	 Email Address:
Dates:	Email Address
From:	To:
Name:	Age:
Type of childcare requested:	
☐ Registered Daycare ☐ Private babysitter	☐ Afterschool Care
Name of Provider:	Telephone #:
Address:	
Pates:	Email Address:
Dates:	To:
From:	To:

Name	Age:
Type of childcare requested:	
□ Registered Daycare □ Private babysitter	☐ Afterschool Care
Name of Provider:	Telephone #:
Address:	
	Francii Andriana
Dates:	
From:	To:
hildcare provider changes throughout the y	mitted at the start of every academic year or if the curre year. Once the Childcare Provider request form is form will be sent to you to submit for payment.
iignature:	Date:
For Office Use Only:	