



Nunatsiavut Government – EDUCATION DIVISION
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Childcare Request Form

Student Name: _____	Program: _____
Student #: _____	Institution: _____
Living Arrangements (while in training): Check one box per semester: <input type="checkbox"/> renting/boarding <input type="checkbox"/> living with parents <input type="checkbox"/> campus residence <input type="checkbox"/> own home	Mailing Address (while in training): _____ City/Town: _____ Province: _____ Postal Code: _____
Primary Email Address: _____	Phone #: _____

Number of dependents requiring childcare: _____
(If requesting childcare for **more than one child**, please complete each section.)

Child 1:

Name: _____	Age: _____
Type of childcare requested: <input type="checkbox"/> Registered Daycare <input type="checkbox"/> Private babysitter <input type="checkbox"/> Afterschool Care	
Name of Provider: _____	Telephone #: _____
Address: _____	Cell Phone#: _____
_____	Email Address: _____
Dates: From: _____	To: _____

Child 2:

Name: _____	Age: _____
Type of childcare requested: <input type="checkbox"/> Registered Daycare <input type="checkbox"/> Private babysitter <input type="checkbox"/> Afterschool Care	
Name of Provider: _____	Telephone #: _____
Address: _____	Cell Phone#: _____
_____	Email Address: _____
Dates: From: _____	To: _____

Child 3:

Name: _____		Age: _____	
Type of childcare requested:			
<input type="checkbox"/> Registered Daycare <input type="checkbox"/> Private babysitter <input type="checkbox"/> Afterschool Care			
Name of Provider: _____		Telephone #: _____	
Address: _____		Cell Phone#: _____	
_____		_____	
_____		Email Address: _____	
Dates:			
From: _____		To: _____	

Child 4:

Name: _____		Age: _____	
Type of childcare requested:			
<input type="checkbox"/> Registered Daycare <input type="checkbox"/> Private babysitter <input type="checkbox"/> Afterschool Care			
Name of Provider: _____		Telephone #: _____	
Address: _____		Cell Phone#: _____	
_____		_____	
_____		Email Address: _____	
Dates:			
From: _____		To: _____	

A new Childcare Request Form must be submitted at the start of every academic year or if the current childcare provider changes throughout the year. Once the Childcare Provider request form is submitted and approved, you will receive the same rate bi-weekly and you will be responsible for paying your childcare provider.

Childcare will only be provided from the date that the Childcare Request has been approved.

***Student Signature:** _____ **Date:** _____

Private Childcare Provider Signature: _____ Date: _____

Private Childcare Provider Signature: _____ Date: _____

For Office Use Only:

Approved: ☐ Yes ☐ No **Amount Approved:** _____

Approved by: _____ **Date:** _____

Entered by: _____ **Date:** _____

Funding Allocation: ☐ PSSSP ☐ ISETP (☐ EI ☐ CRF) ☐ IPSE