

Vanderbilt Child and Family Center
University Child Care Application Form

**Medical Center Employees should NOT complete this application.
VUMC employees should visit hr.vumc.org/cfc for child care info and inquiries**
(please type or print clearly)

Child's Name _____

Birthdate _____ Male or Female _____
(or due date)

VU Staff Member's Full Name _____
(as it will appear on your Vanderbilt Paycheck)

Employee ID#: _____ Student ID# _____

Department _____ Position _____

If employment (or student term) has not yet started at Vanderbilt please give expected start date
_____ and attach offer letter with salary redacted

Campus Ph. _____

Vanderbilt E-mail _____

Personal E-mail _____

Home Address: street _____
city/state _____ zip _____

Home Phone _____ Cell Phone _____

2nd Parent's Name _____

Email Address: _____

Place of employment _____ Work Ph. _____

If Vanderbilt: Dept _____ Position _____ EMP ID# _____

Vanderbilt Email _____

Home Phone (if different) _____ Cell Phone _____

Desired Enrollment Date _____

VCFC cannot guarantee or predict a start-date at the time of application.

Does this child have a sibling who is presently enrolled at VCFC? _____ If so, which
site _____

VU Staff Member's Signature _____ Date _____

Please enclose \$50.00* application fee (payable to VCFC) and **mail** to:
Vanderbilt Child and Family Center, 1105 18th Avenue South, Nashville TN 37212

*This fee will be applied to the \$100.00 enrollment fee should your child be enrolled.

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Date App. Rec'd _____ App Fee Pd. _____ Check Number _____