

For office use only:  
Date and time application received:

\_\_\_\_\_

**Georgia State University  
Child Development Program  
Waiting List Application**

**Child's Name:** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Home Address \_\_\_\_\_

City & Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

E-mail Address \_\_\_\_\_

Is mother affiliated with *GSU*? \_\_\_\_\_

(If yes) Please check one: \_\_\_\_\_ Student \_\_\_\_\_ Staff \_\_\_\_\_ Faculty

*GSU* Department, if Staff or Faculty: \_\_\_\_\_

Is mother a State of Georgia employee? \_\_\_\_\_

If yes please list where employed with the State \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Work Phone** \_\_\_\_\_

E-mail Address \_\_\_\_\_

Is father affiliated with *GSU*? \_\_\_\_\_

(If yes) Please check one: \_\_\_\_\_ Student \_\_\_\_\_ Staff \_\_\_\_\_ Faculty

*GSU* Department, if Staff or Faculty: \_\_\_\_\_

Is father a State of Georgia employee? \_\_\_\_\_

If yes please list where employed with the State \_\_\_\_\_

***Optional***

Sex \_\_\_\_\_

Race \_\_\_\_\_

Does your child have any physical disabilities ? \_\_\_\_\_