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Opening hours: Monday, Tuesday and Thursday from 8 am- 4pm . Wednesday and Friday from 8 am - 3 pm

Bank details: IBAN DE88 2905 0101 0001 1505 23

Child acceptance application form at Uni-Kindertagesstätte e.V.

The main requirement for acceptance: The child's first place of residence has to be in Bremen!

1. Parents:	Parent 1	Parent 2
Surname:
First name:
Date of birth:
Street:
Place of residence:
Phone:
Email:

Please circle all those that apply:

Student:	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Ph. D. student (immatr.)	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Employee of the university:	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Employed:	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
Single parent:	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

2. Child:

First name: Surname:

Birthday: Acceptance requested from:

Other important information (e.g. Allergies):.....

Gender of child: Nationality of child:

Languages, in which the child is educated:

3. Reasons for acceptance:

.....

4. Custody:

The custody of the mentioned child has/ have: both parents mother father

Please list one other person beside the person of custody that has a close relation to the child:

Surname: First name: In relation to child:

Surname: First name: In relation to child:

(e.g. grandmother, brother, friend of the family)

Important: Before any other person but the parents is willing to pick up the child from the kindergarden she/ he has to be introduced to the group leaders!

I obligate myself to inform the directorate if any changes appear.

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(Date, Signature of persons of custody)