

Waiting List Application Information



Thank you for your interest in Generations Crossing. The waiting list application follows this letter. If you are needing a spot for more than one child, please fill out a separate application for each.

The most asked question is: How long is your waiting list? The answer is not an easy nor a quick one. When we are able to offer spots from the waiting list, sometimes it is just one full-time spot. In that case, all requests for part-time will not be considered. The opposite would be true if we only had a part-time spot open. (Please note: Our part-time options, when available, are either M/W/F or T/Th.) If we only have one spot to offer, then requests that involve siblings will be overlooked unless we have been told that they are not necessarily a “package deal”. We tend to have the most openings in June and August. That is when it would be more likely to fit siblings in. In addition, sometimes, by the time we are able to offer a spot to a waiting family, they have already had to find care elsewhere. In the infant room, they may not want a spot as early as we have one available. In any room, if we have an opening and your requested start date is within two months, if you are next on the list you will be offered the chance to pay half-price to hold the spot. If you choose not to do this, you will not lose your place in line. However, we will move on to the next application. If you would like to schedule a tour, please contact us at (540) 434-4901, and we will be happy to schedule one

There is a \$100 non-refundable application fee per child to be put on our waiting list. If you are offered a spot in our center and enroll your child, that money will be applied to your registration fee. Payments can be made online or in person.

This application can be emailed to childcare@generationscrossing.com. Should you have any further questions, please feel free to call the center. You can also find more information on our website www.generationscrossing.com. We are also on Facebook! Thank you again for your interest!

Generations Crossing Waiting List Application

*Please fill out a separate application for each child.

Date of application: _____

Child's name: _____ male/female

Date of birth/Due date: _____

Parent's name(s): _____

Address: _____

Home phone (if applicable): _____

Cell phone numbers: (Please circle whose number)

Mom/Dad: _____ Mom/Dad: _____

Best e-mail address to use: _____

Requested start date: _____

Requested schedule: (Please circle applicable days)

Monday-Friday (full-time) **OR** (part-time) Mon/Wed/Fri Tues/Thurs

In accordance with Title VI of the 1964 Civil Rights Act and because Generations Crossing is a recipient of federal funds, we ask for your race/ethnicity. This is *optional*, is for demographic information only, and has no bearing on placement. Thank you. Race/Ethnicity: _____

Office use only:

**Sibling already enrolled: _____ DOB: _____ Room: _____
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Date application received: _____ Toured: _____

Application fee: cash _____ credit card _____ check # _____

Offered opening on _____ declined ____ accepted ____