

Email completed form to: pncc@prairienaturecc.com

- o PNCC has a long wait list and acceptance isn't guaranteed
 - o https://childcaresearch.gov.mb.ca/

| Application Date (Y/M/D) | |
|--------------------------|--|
| Child's Name | |
| Birthday (Y/M/D) | |
| Parent/Guardian Name | |
| Phone | |
| Email | |
| Address | |
| Parent/Guardian Name | |
| Phone | |
| Email | |
| Address | |
| Preferred start date | |

| Program Required | √ Check One |
|---|-------------|
| Preschool: 2-5 years, includes Kindergarten | |
| School Age: Grades 1-6 | |
| School Attending | √ Check One |
| Westview School: K-5 | |
| John W. Gunn Middle School: Grade 6 only | |

| Subsidy (if required) Province of Manitoba fs - Child Care Subsidy (gov.mb.ca) | YES | NO |
|--|-----|----|
| Currently approved? | | |
| Have you applied? | | |
| Submission date | | |

| Help us to meet your child's needs | Explanation |
|--|-------------|
| Are there any allergies or medical diagnoses we should be aware | |
| of? | |
| Does your child take any regular medication? i.e., Epi-pen, | |
| asthma inhaler, seizure meds. | |
| Unified Referral and Intake System (URIS) application will | |
| be required | |
| Do you have any Child Development/Emotional Management | |
| concerns for your child, that may require inclusion support at the | |
| center? | |
| Is your child receiving Specialized Services for Children and Youth | |
| (SSCY) that they may require support with at the center? | |
| i.e., hearing, vision, SLP, OT https://sscy.ca/ | |

| Primary language spoken at home? | |
|--|--|
| Does your child require toilet training support? | |
| Food Restrictions? Check if applicable | |
| Vegan | |
| Vegetarian | |
| Other | |

| Nature Based Programming | YES | NO |
|--|-----|----|
| Since nature and outdoor play is an integral part of PNCC's philosophy are you willing to | | |
| purchase/obtain appropriate seasonal clothing so your child can be comfortable and | | |
| fully engaged while outdoors during all four seasons? i.e.: | | |
| Spring: rain jacket, splash pants, rubber boots | | |
| Summer: sun hat, comfortable walking shoes, swim wear (for water play) | | |
| o Autumn: Jacket + Sweater, splash pants | | |
| o Winter: winter jacket, ski pants, winter boots, thermal mittens, neck warmer | | |

| Priority List | | Explanation |
|---|--|-------------|
| 1. PNCC Educators | | |
| 2. Sibling: Child with sibling at PNCC | | |
| 3. Previous Child enrolled at PNCC | | |
| 4. Teacher/Staff: Westview School or John W. Gunn Middle School | | |