



LA Delta Children's Center Application

Date of Application: _____

Name of Child: _____ Age: _____

Potty Trained: YES or NO

Birth date: _____

Address: _____
Street City State Zip

.....
Mother/Guardian's Name: _____

Address: _____
Street City State Zip

Telephone/Contact information: _____

Job title/position: _____

Please Circle: Student at LDCC Faculty at LDCC Staff at LDCC

.....
Father/Guardian's Name: _____

Address: _____
Street City State Zip

Telephone/Contact information: _____

Job title/position: _____

Please Circle: Student at LDCC Faculty at LDCC Staff at LDCC

Please mail application to:

Donna Guice

7500 Milhaven Rd.

Monroe, LA 71203

Email: dguice@ladelta.edu

Fax: 318-345-9087

Louisiana Delta Community College does not discriminate in its education and employment programs on the basis of religion, age, race, color, national origin, gender, marital or parental status, or disability, and complies with Title VI of the Civil Rights Act of 1964, Title IX Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990.