

Application for the Kindergarten year 2022/2023

Personal details off he child			
Surname:			
First name:		Gender:	<input type="radio"/> male <input type="radio"/> female <input type="radio"/> divers
Date of birth:		Place of birth:	
Nationality:			
Religious affiliation:			
Street name/ Number:			
Post code/ town:			

Custodian			
Relationship:	<input type="radio"/> Mother <input type="radio"/> Father <input type="radio"/>		Custodian: <input type="radio"/> yes <input type="radio"/> no
Surname:		Gender:	<input type="radio"/> m <input type="radio"/> f <input type="radio"/> d
First name:		Date of birth:	
Street name/ Nr.:		Place of birth:	
Post code/ town:			
Nationality:		Profession:	
Communication:	Home, mobile	Private/ work	Number
Comment:			
Member in KJE e.V.	<input type="radio"/> yes <input type="radio"/> no		

Custodian			
Relationship:		Relationship:	
Surname:		Surname:	
First name:		First name:	
Street name/ Nr.:		Street name/ Nr.:	
Post code/ town:			
Nationality:		Profession:	
Communication:	Home, mobile	Private/ work	Number
Comment:			
Member in KJE e.V.	<input type="radio"/> yes <input type="radio"/> no		

Siblings			
Surname:		Date of birth:	
First name:		Place of birth:	
Surname:		Date of birth:	
First name:		Place of birth:	
Surname:		Date of birth:	
First name:		Place of birth:	
Doctor/ Medical contact:			
Dr. Steinberg:	<input type="radio"/> yes		<input type="radio"/> no
Dres. Wohlmann:	<input type="radio"/> yes <input type="radio"/> Daniela <input type="radio"/> Simone		<input type="radio"/> no
Other doctor/ pediatrician (adress, phone number)			
Health/ vital medical information:			
Seizure disorder, mediacation, intolerances, ...			
Known allergies:			
Intolerance of any food or drinks:			
Previous experience (SOS, SPZ, SVE, daycare, playgroups, Kindergarten, therapies)			
Care level			
<input type="radio"/> not yet determined		<input type="radio"/> Level_____	
Disabled Pass			
<input type="radio"/> yes		<input type="radio"/> no	

Booking times		
	Booking times from- till	Hours in total per day
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Please note:

- The **core time** is between 8:30 am and 12 noon. During this time, every child must be present in the facility.
- We have a **minimum booking time** of 4 hours a day.
- Lunch is served at 12 noon, **so collection between 12 noon and 1 pm is not possible**
- **U-3 children** can only book the 20-hour category during acclimatization. Longer bookings can only be made after the third birthday and in close consultation with the respective group staff.

Current fees (1.9.2019)		
Weekly booking times	Cost (without lunch)	+ lunch cost from 12:00
20 hours	(1)17,00 Euro	
20,5 - 25 hours	(1)29,00 Euro	1 lunch/week: + 12,60 Euro monthly
25,5 – 30 hours	(1)39,00 Euro	2 lunches/week: + 25,20 Euro monthly
30,5 – 35 hours	(1)49,00 Euro	3 lunches/week: + 37,80 Euro monthly
35,5 – 40 hours	(1)59,00 Euro	4 lunches/week: + 50,40 Euro monthly
40,5 – 45 hours	(1)69,00 Euro	5 lunches/week: + 63,00 Euro monthly

From april 2019 on, 100.- Euro of the monthly Kindergartenfee will be covered by Freistaat Bayern (starting with the september oft he year, the child turns 3).

With your signature, you agree that your child's personal data may be passed on to the various facilities and to the Garmisch-Partenkirchen council for the purpose of data comparison (multiple reports / waiting lists). After the process has been completed, the data will be deleted. Your personal data will only be processed for a specific purpose and will not be passed on to third parties. Data protection is based on the currently valid DSGVO.

Town/ date	Signature of the custodian(s)

Childs' name: _____

Additional questions for your application

1. What reason does your child need a support station for?

2. Do you have other children in need of special support?

3. In what facilities have you already applied to?

4. Are there difficult situations in your family?

5. How does your family deal with the special needs of your child?

6. How would you describe your child?

7. What language does your child speak?

8. What expectations to you have at this kindergarten?

9. What kind of experience with other children, daycare, playgroups does your child have?

10. Particularities:

Note taker: _____