



UTKALITAA DAY CARE CENTRE

UTKAL UNIVERSITY, VANI VIHAR, BHUBANESWAR - 751004
daycare@utkaluniversity.ac.in, +919090063633, +919090048742

DAY CARE REGISTRATION FORM

Please paste the latest passport-size photograph of the Child here

Please paste the latest passport-size photograph of the Mother here

Please paste the latest passport-size photograph of the Father

1 PARTICULARS OF THE CHILD

Name: _____

Blood Group: _____

Date of Birth: _____

Age as of 31 July of the current year: _____

Residence Address: _____

Residence Tel. No: _____

Contact Details: E-Mail: _____

Child's Doctor Details

Name: _____

Phone number: _____

II. Particulars of The Parents'/Guardian

	Father	Mother
Name		
Occupation		
Employee Code		
Designation		
Type: Regular/ Contractual		
Department		
Residence Address		
Mobile No.		
E- Mail		
Specimen Signature		

OR

	Guardian
Name	
Occupation	
Employee Code	
Designation	
Type: Regular/ Contractual	
Department	
Residence Address	
Mobile No.	
E- Mail	
Specimen Signature	

III. Particulars of The Siblings

	Sibling 1	Sibling 2
Name		
Date of Birth		
Blood Group		
Class		
School		

IV. Other Emergency Contact

Name:

Relationship to Child:

Mobile

Residential Address

V. Authorization for Pickup

Your child will only be given to an authorized person listed by you in this form (Parent/Guardian and Emergency contact). Kindly attach a photo ID of the authorized person with this form. In case of an emergency or an unforeseen circumstance, please indicate the name, address, and phone number of any other person/s whom you authorize to pick up your child on your behalf.

Name	Address	Phone

VI. Medical Information:

Medical Problems (past and present, if any):

On Medication _____ Yes _____ No _____

Additional Information: Please indicate eating habits, likes/ dislikes, potty training (trained/untrained), Special Interests, etc _____

*Immunization: _____

*Kindly provide a photocopy of your child's recent immunization record.

VII. Consent in Case of Emergency

It is our policy to notify a parent when a child is ill or needs medical attention. In case the Parent/Guardian cannot be contacted and the child needs immediate medical help, he/she will be taken to the university health Centre/nearby hospital as required. Please sign below so that we can take appropriate action on the child on your behalf.

I hereby give my/our consent for my/our child, when ill/injured/in case of any other unforeseen medical emergency, to be taken to the University Health Centre/Nearby Hospital, if required, by the staff of my child's Day Care Centre when I/We cannot be contacted. I give my consent to the University Ambulance being used as a transport facility for the child, if necessary.

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Mother's/Guardian Signature with date

Father's/Guardian Signature with date



Utkalita
(ଉତ୍କଳିତା)

Utkal University Day Care Centre
Vani Vihar, Bhubaneswar

Admission Notice

Applications in the prescribed format (which is attached) are invited for admission into the Day Care Centre, Utkal University.

Around 15-20 children in the age group of 1 to 4 years will be taken in on a first-come-first-serve basis. The services will be available from 10.30am to 4.30pm on working days only. Parents will pay a one-time registration fee of Rs 2,000/-, and will pay the monthly charges of Rs 3000/-. The children of Utkal University employees will be given admission as a matter of priority. The facility is also open for children other than that of our employees.

The following facilities will be made available:

1. Nurturing, responsive and inclusive environment
2. Clean and hygienic space with provisions for complimentary nutrition and sleeping facilities. Parents will bring their own food for children.
3. Dedicated childcare worker for care and safety of the children.
4. Developmentally age-appropriate play activities.
5. Child-friendly toys/books/play materials
6. Child-friendly toilets, first aid and medical facilities
7. Waiting area and breastfeeding corner for mothers
8. Child protection policy would be adhered to with reference to the safety and protection guidelines as mandated by National Commission for protection of child rights.
9. Any kind of sexual abuse and sexual exploitation to be strictly dealt under POCSO act.
10. The supervisor has to ensure that no persons, known or unknown be allowed inside the crèche at any point of time, during the functioning hours. Plumbing or any other civil work would be done during weekend/holidays only.
11. Provision of security guard for the centre.
12. In-campus medical service in case of emergency.

Application may be sent to the following Email Id: daycare@utkaluniversity.ac.in and the print / hard copy to the following address:

Director
Day Care Centre
Utkal University, VaniVihar
Bhubaneswar-751004

Director
Day Care Centre
Utkal University

