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 Denison, TX 75020
 (903)463-9997 / (888)813-1992
 903-465-8680 or 903-463-3073 fax
 childcare@workforcesolutionstexoma.com

Atencion:
 Para obtener esta u otras formas on Espanol, favor the
 llamar a esta oficina al
 (903)463-9997 / (888)813-1992

Customer Childcare Information Sheet

All forms must be completed in ink; white-out **NOT** accepted.

Customer Name: _____

Please complete the following information:

Have you already selected a childcare provider? Yes No

If yes, are you already using this provider? Yes No

Please enter the month/year you started using this provider: ____ / ____.

If no, does the provider have an opening? Yes No

If you have selected a provider, please complete the following information on the center or individual you have selected to provide care:

Provider Name: _____
 Contact Person: _____
 Address: _____
 City: _____ County: _____ Zip: _____
 Telephone: _____ Fax Number: _____

If you have selected an individual to care for your child(ren) please complete the additional information needed:

Date of Birth of the person you have selected to
 care for your child(ren): _____
 Social Security Number: _____
 The individual's relationship (kin) to the child: _____

Submission of this form does not represent notification of changes regarding address, employment, training, income or family size. You are required to contact your case worker directly at Workforce Texoma for proper notification of any changes.