



## Government Free Child Care Scheme

Name of Child \_\_\_\_\_ I.D. \_\_\_\_\_  
(Very important )  
Address \_\_\_\_\_  
Town. \_\_\_\_\_ . D.O.B. \_\_\_\_\_

Mother Name \_\_\_\_\_ I.D. \_\_\_\_\_  
Mobile/Tel. \_\_\_\_\_ Email. \_\_\_\_\_  
Employer's Name \_\_\_\_\_ Tel. \_\_\_\_\_  
Address \_\_\_\_\_

Father Name \_\_\_\_\_ I.D. \_\_\_\_\_  
Mobile/Tel. \_\_\_\_\_ Email. \_\_\_\_\_  
Employer's Name \_\_\_\_\_ Tel. \_\_\_\_\_  
Address \_\_\_\_\_

Location Of Centre \_\_\_\_\_ No. of hours Needed per Week \_\_\_\_\_  
(San Gwann – Msida – Mosta)  
Date \_\_\_\_\_ Date of commencement \_\_\_\_\_

### Important Notice :- *To apply you need the following documents*

- A Letter from the father 's employer stating that he works with him or his company.
- A letter from the Mother's employer stating the days and hours she works.  
Example Ms. X works from Monday to Friday , from 8am to 5pm.
- Mother's Last **three** recent pay Slips. If **New** job it has to be stated in the employer's letter.

If Self Employed a Letter stating the days and hours that you work and your Last TAX return.

**\*\*The CHILD I.D. is very important (It can be obtained from the immunization booklet)\*\***

**\*\*\* The letters and or documents must be dated and signed \*\*\***

Date \_\_\_\_\_ Date \_\_\_\_\_  
Parent/Carer Signature \_\_\_\_\_ Parent/Carer Signature \_\_\_\_\_