



ALVIN
Independent School District



PEP CHILD CARE CENTER ADMISSION REQUEST FORM

REQUESTED PEP CHILD CARE CENTER LOCATION: AHS _____ MHS _____

DATE SUBMITTED _____ REQUESTED START DATE _____

CHILD'S LEGAL NAME _____ BIRTHDATE _____

PARENT/GUARDIAN _____ EMAIL _____

PARENT/GUARDIAN CONTACT# 1 _____ CONTACT# 2 _____

PLEASE VERIFY: PEP STUDENT _____ AISD DISTRICT STAFF _____

Please email ADMISSION REQUEST to the selected AISD PEP Child Care Center.

Alvin HS PEP Child Care Center
907 Cedar Lawn
PEP Coordinator/Director: Linda Carter lcarter@alvinisd.net Phone# 281-245-2758 Fax# 281-585-8007

Manvel HS PEP Child Care Center
19601 HWY 6
PEP Coordinator/Director: Felicia Roberts-Fritz froberts@alvinisd.net Phone# 281-245-3110 Fax# 281-245-2049

OFFICE USE:

Contact Date _____ Staff Contact _____

Notes:

