



Expression of interest for a nursery or a kindergarten place in the Kita Unikate for the children of employees of Saarland University

We are pleased that you are interested in the Kita Unikate for your child.
Please provide your personal data for pre-registration in the waiting list.

1. Details of the desired care

For children from 0 to 3 years:

Nursery

For children from 3 years to school enrollment:

Kindergarten

Desired start date of care (month/year): _____

2. Information about the child

Last Name: _____

First Name: _____

Date of birth: _____ female male diverse

Street: _____

ZIP CODE, Location: _____

Nationality: _____

Note:

If your child is not yet born, please enter the calculated date of birth. Do not forget to update your data after the birth. Incomplete applications can not be considered.



3. Comments about the child

Family language(s):

Sibling:

Requirement of additional support (e.g. disability / chronic disease):

Family circumstances that may be relevant to care:

Allergies/food intolerances/dietary needs:



4. Information about the parents /guardians

	Parent/Guardian	Parent/Guardian
Last Name:	_____	_____
First Name:	_____	_____
Date of birth:	_____	_____
Nationality:	_____	_____
Street:	_____	_____
ZIP CODE, Location:	_____	_____
Phone:	_____	_____
Business phone:	_____	_____
E-mail address:	_____	_____
Employer:	_____	_____
Personnel number (UdS)	_____	_____
Type of contract:	<input type="checkbox"/> Temporary	<input type="checkbox"/> Temporary
End of employment contract:	_____	_____
	<input type="checkbox"/> Unlimited	<input type="checkbox"/> Unlimited
Area:	<input type="checkbox"/> Non-scientific staff <input type="checkbox"/> Scientific staff <input type="checkbox"/> Professorship	<input type="checkbox"/> Non-scientific staff <input type="checkbox"/> Scientific staff <input type="checkbox"/> Professorship
Family status:	<input type="checkbox"/> Married <input type="checkbox"/> Living together <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Single parent <input type="checkbox"/> Sole custody	<input type="checkbox"/> Married <input type="checkbox"/> Living together <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Single parent <input type="checkbox"/> Sole custody



5. Further information

The Kita place is a prerequisite for:

- Commencement of employment at Saarland University

Yes No

- Re-entry after maternity/parental leave at Saarland University

Yes No

6. Waiting Pool

If my registration cannot be accommodated on the requested date, please add my child to the waiting pool:

Yes No

All expressions of interest that have not received a place by the desired entry date will be considered in subsequent placement decisions after inclusion in the waiting pool.

7. Registration in other Kitas/Childcare facilities

Have you (pre-)registered your child in another facility simultaneously?

Yes No

If yes, where?



8. Privacy notice

The data is collected by the Equal Opportunities and Diversity Management Unit in order to realize the allocation of places in the Unikate daycare center for the children of employees of Saarland University.

Beyond this, no data will be passed on to third parties. All data provided will be treated confidentially in accordance with the applicable data protection regulations of the Kita planner of the regional association (www.kitaplatz-regionalverband.de).

With your signature, you confirm that you have read this notice and agree to the use and disclosure of the data provided in the manner described.

9. Final clauses

The submission of this form does not guarantee a childcare place.
As soon as we can offer you a childcare place, we will contact you.
We will not be able to answer individual inquiries on placement.

Place, Date

Parent/Guardian

Parent/Guardian

Signature

Signature

Please send the pre-registration by mail to: familie@uni-saarland.de



To be filled out by the Equal Opportunities and Diversity Management Unit

Receipt of the application

CDM: _____

Consultation:

CDM: _____

Registration Kitaplaner:

CDM: _____

Recording of the application:

CDM: _____

Ranking:

CDM: _____

Notes:

Childcare place offered from:

Contract until:
