



Previous Child Care Information for Newly Enrolling Children

(Updated 9/16/2020)

Austin Public Health requires that this document be completed when children are being newly enrolled in care with a licensed, registered, or listed child care program located in the City of Austin and/or in Travis County to help mitigate the spread of COVID-19.

1.	Has your child been in care in another child care program or school within the last two weeks	
	☐ Yes ☐ No	
2.	If you answered yes to que	stion 1, please provide:
	Name of the program or school:	
	Program/school phone nur	nber:
3.	If you answered yes to question 1, has there been a closure of your child's classroom or the entire child care program or school due to cases of COVID-19 within the last two weeks?	
	☐ Yes ☐ No	
permis child's	ssion for the child care progr	fy that the above information is true and correct, and I give ram in which I am enrolling my child/children to contact my re program or school to obtain information regarding
Signat	ure:	Date: