



City of Peterborough

Children's Services

178 Charlotte Street; P.O. Box 4138
Peterborough, ON K9J 8S1
Phone: (705) 748-8830
Fax: (705) 748-8858

Social Services Division

Sporadic Calendar

Name of Parent/Guardian: _____

Name of Child(ren): _____

Agency: _____ Month: _____

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Directions: fill out work hours (the case manager will include reasonable transportation time). Please indicate if extra travel time is required. Periodically, recent pay stubs will be requested to back up the child care that we have provided.

This verifies care I required because of approved "subsidy" activity. I/We certify that all the above information is true and correct. I/We understand that, in the event that I/we misrepresent my/our circumstances, my/our file would be subject to a Fraud Review.

Date: _____ Parent's Signature: _____

Date: _____ Provider's/Agency Signature: _____

Notice with Respect to the Collection of Personal Information
(Municipal Freedom of Information and Protection of Privacy Act)

This information is collected under the legal authority of the Day Nurseries Act. This information will be used by Social Services Division staff for the purpose of administering the services and programs prescribed or authorized under this act. For more information contact the Manager of Children's Services, or designate, at 178 Charlotte St, Peterborough, ON K9J 8S1 or by email at socialservices@peterborough.ca