



# KVC Kansas Application for Daycare

Important: This entire Application and Verification of Employment must be completed before KVC will approve day care payment. Your employer(s) should return the Verification of Employment form(s) to:

**KVC Behavioral Healthcare  
Accounting Services  
21350 West 153rd Street  
Olathe, KS 66061**

Foster Family Name: \_\_\_\_\_  
Foster Family Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Country: \_\_\_\_\_ Phone: \_\_\_\_\_

Foster Parent: \_\_\_\_\_  
Social Security #: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Foster Parent: \_\_\_\_\_  
Social Security #: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

### Work/School Schedule

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_  
Saturday \_\_\_\_\_  
Sunday \_\_\_\_\_

### Work/School Schedule

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
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Saturday \_\_\_\_\_  
Sunday \_\_\_\_\_

