

**Designation Form  
Northwestern University Employee/Student Verification**

**For Enrollment at the Northwestern Medicine  
Bernice E. Lavin Early Childhood Education Center**

Please complete this form and return to:

Office of Work/Life & Family Resources  
720 University Place, #106  
Evanston, IL 60208  
Email: [worklife@northwestern.edu](mailto:worklife@northwestern.edu)

**Today's Date:** \_\_\_\_\_

**Your Name:** \_\_\_\_\_

\*Any fee assistance received will be reflected on this parent's paycheck as imputed income

**Northwestern Wildcard Employee ID or Student ID (7 digits):** \_\_\_\_\_

**Name of child(ren) to be enrolled: 1)** \_\_\_\_\_ **2)** \_\_\_\_\_

**Birthdate of child(ren) to be enrolled: 1)** \_\_\_\_\_ **2)** \_\_\_\_\_

**Enrollee Start Date:** \_\_\_\_\_

**Type of NU Affiliate (please check only ONE box):**

<b>Faculty</b>	<b>Staff</b>	<b>Student*</b>	<b>Affiliates</b>
<input type="checkbox"/> Pritzker School of Law	<input type="checkbox"/> Pritzker School of Law	<input type="checkbox"/> Pritzker School of Law	<input type="checkbox"/> Shirley Ryan AbilityLab (formerly RIC)
<input type="checkbox"/> Feinberg School of Medicine (FSM)	<input type="checkbox"/> Feinberg School of Medicine School (FSM)	<input type="checkbox"/> Feinberg School of Medicine School (FSM)	<input type="checkbox"/> McGaw Medical Education (Residents only)*
<input type="checkbox"/> School of Prof Studies (SPS)	<input type="checkbox"/> School of Prof Studies (SPS)	<input type="checkbox"/> School of Prof Studies (SPS)	
<input type="checkbox"/> Northwestern Medical Group (NMG) <b>Dual role with the University</b>	<input type="checkbox"/> Kellogg	<input type="checkbox"/> The Graduate School (TGS)	
<input type="checkbox"/> Kellogg	<input type="checkbox"/> Other _____	<input type="checkbox"/> Kellogg	
<input type="checkbox"/> Other _____		<input type="checkbox"/> Other _____	

\*Graduation Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please note that once this form has been approved, additional forms will be required in order to apply for fee assistance. This Designation Form does not guarantee a place on the wait list, enrollment or fee assistance award. All fee assistance is to be paid by Northwestern University. Fees are set by the Bernice E. Lavin Early Childhood Education Center, and tuition after fee assistance award will be the responsibility of the applicant.

**FOR OFFICE USE ONLY**

**The above applicant is a Northwestern University affiliate.**

Northwestern Verification Signature: \_\_\_\_\_ Date: \_\_\_\_\_