



## Provider Listing and Resource Request

Please save and email this to [CCRR@elcescambia.org](mailto:CCRR@elcescambia.org) or print and mail to **1720 W. Fairfield Dr., Suite 100/400**

**Pensacola, FL 32501** to receive a free, computer-generated listing of childcare providers and/or any additional community resources you may need. When you receive your listing, please check the included **cover letter** for the DCF Licensing number and website to review the providers for complaints or licensing violations.

If you need financial assistance with the cost of childcare, on the provider listings under the heading **Subsidy Options** will be noted if the provider offers scholarships, negotiated rates, sibling discounts, sliding fee scales, or any other subsidy options.

You may apply for services with the Early Learning Coalition at <https://familyservices.floridaearlylearning.com/Account/Login>. If you have any questions or require any additional childcare listings or resources, please call: 850-595-5915.

- **Name:** \_\_\_\_\_
- **Address:** \_\_\_\_\_  
\_\_\_\_\_
- **Phone number:** \_\_\_\_\_
- **Email address:** \_\_\_\_\_
- **Children:** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_  
\_\_\_\_\_ **Date of birth:** \_\_\_\_\_  
\_\_\_\_\_ **Date of birth:** \_\_\_\_\_  
\_\_\_\_\_ **Date of birth:** \_\_\_\_\_
- **Do you have a referral from DCF or FFN?**      YES      NO
- **I am:**              EMPLOYED      IN SCHOOL      JOB SEARCH      OTHER \_\_\_\_\_
- **Type of provider requested (choose all that apply):**  
            LICENSED CENTER      LICENSED EXEMPT CENTER      REGISTERED HOME      LICENSED HOME
- **Hours of care needed:**      DAYS      EVENINGS      NIGHTS      WEEKENDS      OPEN 24 HOURS
- **Other needs:**  
- **TRANSPORTATION** (Before or after to school) \_\_\_\_\_ **SPECIAL NEEDS** \_\_\_\_\_
- **Additional zip codes for provider search:** \_\_\_\_\_
- **I need additional resources:** \_\_\_\_\_  
\_\_\_\_\_