

5.6.5 – Creche for faculty

To support educational opportunities for female staff and faculty who are mothers, the university has established a **free crèche facility on campus, called BLOOMZ**. This facility offers comprehensive childcare services, ensuring young mothers can engage with their university responsibilities without the stress of childcare concerns. At BLOOMZ, children thrive in a nurturing and natural learning environment. **The Day Care facility is dedicated to providing a safe and nurturing environment for children while their parents or guardians are at work. To ensure the well-being of all children, the facility adheres to established guidelines and procedures. Ongoing communication with parents and guardians is maintained to promptly address any concerns or issues that may arise.** The focus goes beyond basic morals, as efforts are made to instill good habits in the children. They engage in playful activities while learning fundamental concepts such as counting, sizes, and shapes.





Glimpses of Day Care

CHILD CARE ENROLLMENT FORM



Child Information

1st Child First Name: KARTIK Last Name: ARORA
Name child prefers to be called: KARTIK Grade/Class: 2
Child's Address: B-70, 4th Floor, Honour Homes Sec-29 Faridabad
Gender: Male Female Date of Birth: 05.11.15
Primary hours of care: From 1:PM To 5:00 PM
Days of care: MONDAY to FRIDAY
What languages are spoken with the child at home? ENGLISH AND HINDI
Does the child attend school/ nursery/ play school/ baby sitter, etc.? Yes () No ()



If yes, give details.

- i. Name of school/ play school: DPS FARIDABAD
- ii. Address and phone number: SECTOR-19, 0129-424 1545
0129-424 1549
- iii. Timings of School: 8:00 → 1:PM

Habits

Is the child Vegetarian or Non-vegetarian ()

Mention the food restrictions for your child and the reasons (medical, personal, religious, dislike, etc.)

Sleeping habits during the day:

Timings: 2: to 4 PM

Duration: 2-3 Hrs

Any other information (such as sleeping with a favorite toy, music, etc.):

Playing habits: →

Toys/ games that your child is used to: →

Briefly describe your child's daily routine and activities: →

CHILD CARE ENROLLMENT FORM



Registration Date: 01 July 2022

Parent/Guardian Information

Mother/Guardian First Name: SHARMISTHA Last Name: GOEL
Address: 253 4th FLOOR BPIP PARKLAND SEC 77 FARIDABAD
Faculty/ Institute/Company: MRDC Department: PUBLIC HEALTH
Home Phone: 9953504536 Office Phone: 9910994759
Work Address: MRDC Cell Phone: () _____ Work H
Email: sharmistha.goel@gmail.com
Marital Status: Married Single Divorced Separated Widowed



Father/Guardian First Name: ARCHIT Last Name: AGARWAL
Address: 253 4th FLOOR BPIP PARKLAND PRIDE SEC 77
Faculty/ Institute/Company: Current Frey Department: _____
Home Phone: 9910994759 Office Phone: _____
Work Address: to work Cell Phone: () _____ Work H
Email: archit.agarwal25@gmail.com
Marital Status: Married Single Divorced Separated Widowed



Emergency Contacts & Authorized Pickup Persons:

1st Contact/Pick up Name: SHARMISTHA Phone: 9953504536
Relationship to the Child: MOTHER
 Able to pick up all children in the family



2nd Contact/Pick up Name: ARCHIT Phone: 9910994759
Relationship to the Child: FATHER
 Able to pick up all children in the family



3rd Contact/Pick up Name: _____ Phone: _____
Relationship to the Child: _____
 Able to pick up all children in the family

