Confirmation of provided child care hours for the

□ summer semester □ winter semester

□ 2019 □ 2020 □ 2019/20

Applicant (name, address).....

Imma-Nr. .....

Child minder (name, address).....

Costs per hour .....

Reason for child care	Date	From	To	Number of hours

Göttingen,

…….. ……

Child minder's signature Applicant's signature