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## **Tiny Lanterns Franchisee Application Form**

This application form will help **Tiny Lanterns** evaluate potential franchisees and ensure they meet the qualifications to operate a successful home childcare.

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### **SECTION 1: PERSONAL INFORMATION**

- ◆ **Full Name:** \_\_\_\_\_
  - ◆ **Date of Birth:** \_\_\_\_\_
  - ◆ **Phone Number:** \_\_\_\_\_
  - ◆ **Email Address:** \_\_\_\_\_
  - ◆ **Home Address:** \_\_\_\_\_
  - ◆ **City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_
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### **SECTION 2: HOME DAYCARE LOCATION**

- ◆ **Will the childcare business operate in your home?** ☐ Yes ☐ No
  - ◆ **If no, provide the address of the proposed location:**
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- ◆ **Do you own or rent the property?** ☐ Own ☐ Rent
  - ◆ **If renting, do you have landlord approval for a childcare business?** ☐ Yes ☐ No
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### **SECTION 3: EXPERIENCE & QUALIFICATIONS**

- ◆ **Do you have experience in childcare or early childhood education?** ☐ Yes ☐ No
  - ◆ **If yes, briefly describe your experience:**
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- ◆ Do you hold any childcare-related certifications (e.g., First Aid, ECE diploma)? ☐ Yes ☐ No

- ◆ If yes, please list certifications:

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- ◆ Are you willing to complete the Tiny Lanterns training and certification program? ☐ Yes ☐ No
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## **SECTION 4: BACKGROUND CHECK & SAFETY COMPLIANCE**

- ◆ Are you willing to undergo a Criminal Record & Vulnerable Sector Check? ☐ Yes ☐ No

- ◆ Does your home meet basic safety requirements for a childcare facility? ☐ Yes ☐ No ☐ Unsure

- ◆ Do you have a designated space for the childcare operation? ☐ Yes ☐ No
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## **SECTION 5: BUSINESS READINESS**

- ◆ How soon are you ready to start your Tiny Lanterns daycare?

☐ Immediately ☐ 1-2 months ☐ 3+ months

- ◆ Are you comfortable marketing your daycare to enroll children? ☐ Yes ☐ No

- ◆ Do you understand that a minimum enrollment of 5 children is required? ☐ Yes ☐ No

- ◆ Are you prepared to actively promote your daycare to reach this enrollment? ☐ Yes ☐ No
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## **SECTION 6: AGREEMENT & NEXT STEPS**

By signing this application, I confirm that the information provided is accurate. I understand that submitting this application does not guarantee acceptance into the Tiny Lanterns franchise program. I acknowledge that if approved, I must:

- ☒ Complete the required training & certification.
- ☒ Sign the Tiny Lanterns General Service Agreement.
- ☒ Meet all operational and safety requirements.
- ☒ Maintain an enrollment of at least **5 children** to remain in active status.

◆ Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

◆ Tiny Lanterns Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**After completing the form, please scan and email it to:**

**[info@tinylanterns.ca](mailto:info@tinylanterns.ca)**

**We are currently opening locations in the Durham region:**

**Brock.                      Clarington.**

**Oshawa.                      Pickering.**

**Scugog.                      Uxbridge.**

**Whitby.                      Ajax**

***Applications for other regions will be contacted when we are opening that region. Thanks for your patience.***