



***Parent/Guardian Information***

Who is/are the legal guardian(s) for this child?

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_

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	Legal Guardian #1	Legal Guardian #2
Street Address		
City, State, Zip Code		
Primary Phone		
Secondary Phone		

Is there a court ordered parenting plan for the child? Yes / No

If yes, please describe the parenting time schedule for both parents/guardians:

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If yes, what type of plan is it?

\_\_\_\_\_ Shared Parenting (Joint Custody)

\_\_\_\_\_ Residential Parent (Sole Custody)

## *Background Information*

What are you hoping for your child to gain by participating in preschool?

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Has your child participated in any preschool programs in the past? Yes / No

If yes, please list:

Name	Location	Dates Attended
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Please list several activities your child enjoys:

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Do you suspect or know of any type of disability or developmental delay with your child? Yes / No

If yes, please describe:

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If yes, is your child's pediatrician/family doctor aware of your concerns? Yes / No

What responsibilities does your child have at home?

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Is your child toilet trained during the daytime hours? Yes / No

Is your child able to button/unbutton buttons on clothing? Yes / No

Is your child able to zip/unzip zippers on clothing? Yes / No

Does your child take a nap each day? Yes / No

If yes, my child naps in the: morning / afternoon

For how long? \_\_\_\_\_ minutes / hours

Is there any other information you want the Berne Union Preschool Program to be aware of?

I understand that submission of this application does not guarantee a spot for my child in Berne Union's preschool program, and that spots are awarded based on the board approved enrollment policy. Further, I understand that Berne Union's preschool program is a tuition only program, and that should be child be enrolled in the program, I am expected to pay all tuition payments for my child in a timely manner according to the tuition and payment schedule set for the school year my child is enrolled.

Signature of Legal Guardian/Person Completing Application:

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Date: \_\_\_\_\_