

Parent/Guardian Information

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

Name _____ Relationship to child _____

	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:

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?

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:

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

If yes, please describe:

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

What responsibilities does your child have at home?

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:

Date: _____