

For office use
Application received on date: _____
Application fee paid \$50.00: <input type="checkbox"/>

Sweet Peas Preschool

Application for Admissions 2010 - 2011

Applying for: *(please check one)*

Hours (8:45am - 12:45pm)

2 days per week (circle desired days: M, T, W, Th)

3 days per week (circle desired days: M, T, W, Th)

4 days per week (days: M, T, W, Th)

Days per week	Due Monthly
2 days per week	\$352
3 days per week	\$528
4 days per week	\$705

Please enclose a \$50.00 registration fee with your application.

First and last month's tuition is due on Sept 1st. Subsequent payments are due the first school day of each month.

Special note: Preschool is held Monday through Thursday.

***STUDENT APPLICATION INFORMATION**

Child's full name _____ nickname _____

Application Date _____ Proposed Date of Entrance _____

Gender male female Date of Birth _____ Age _____

Birthplace _____

Country of birth, if other than US _____ Year of Arrival _____

PARENT / GUARDIAN INFORMATION

Parent / Guardian's Full Name _____ Relationship _____

Address _____

Home Tel _____ Work Tel _____

Cel _____ E-mail _____

Place of Business _____

Address _____

Nature of Work _____

Interest, Hobbies, Talents _____

Educational Background _____

Parent / Guardian's Full Name _____ Relationship _____

Address _____

Home Tel _____ Work Tel _____

Cel _____ E-mail _____

Place of Business _____

Address _____

Nature of Work _____

Interest, Hobbies, Talents _____

Educational Background _____

Parent(s) marital status _____ Custodial / visitation arrangements, if any _____

With whom does the child live? (Please give name and relationship to the student of all persons living in the household)

By what name(s) does the student address the parent / guardian(s)? _____

***please fill individual application for each applicant**

OTHER CHILDREN IN FAMILY

Name of Sister(s) / Brother(s), with Date of Birth, Gender and School presently attending:

Name Age Gender School

STUDENT’S PERSONAL PROFILE

What do you consider to be your child’s strongest aptitudes and traits of character: _____

What traits do you wish to see strengthened? _____

What are the most important goals of your child’s education _____

Child’s previous school, if any (*please include all daycare / preschool experience*)

Name Location Dates Attended

Child’s activities outside school (*gym, ballet, swimming, hobbies, etc.*) _____

Average hours of television viewing on weekdays _____ weekend days _____

Average hours of radio / recorded music listening on weekdays _____ weekend days _____

Are there any secondary languages ordinarily spoken in the home? _____

Has your child suffered any emotional or social trauma (*i.e. divorce, domestic violence, family death, etc.*) _____

How does your child relate to adults _____

Briefly describe your child’s interests, tendencies, etc. _____

DEVELOPMENTAL PROFILE

Briefly describe the pregnancy and birth of your child: Natural Cesarean; note any complications, health problems or special conditions _____

As an infant, was your child: under active normally active overactive Is your child a sound sleeper?

yes no Was your child breast fed? yes no If yes, how long _____

Is he/she toilet trained? yes no if yes, when? _____

When did he/she start walking? _____ Talking? _____

How are his/her large motor skills? _____ Fine motor skills? _____

Has your child undergone any psychological testing or treatment? yes no If yes, please explain _____

ADDITIONAL INFORMATION

How did you hear about Sweet Peas Preschool? _____

Sweet Peas Preschool has my permission to contact _____’s previous school and teachers.

I am enclosing my application fee of \$50 (per child), which I understand is non-refundable.

Parent / Guardian Signature _____ Date _____

Parent / Guardian Signature _____ Date _____

Please return to: Admissions, Sweet Peas Preschool, 14422 120th PL NE, Kirkland, WA 98034