

2017 – 2018
Covenant Preschool Application
2070 Ridgecliff Road, Columbus, OH 43221
614-451-6677 EXT. 23; childcenter@covenantpcusa.org



The following non-refundable fees must accompany this application:

- \$50 Application fee (One application fee per family)
- \$25 Supply fee (per child, includes materials needed for individual portfolios)

The first of 9 tuition payments is due Aug. 1, 2017. The last tuition payment is due Apr. 1, 2018. Children must be 3 years old by September 30th, 2017. Classes begin at 9:00 a.m. and end at 11:30 a.m. Please select the number of days per week and the weekdays you would like your child to attend by checking the appropriate box:

- 2 days per week (Tu, Th) \$155 per month x 9 months (\$1395 total tuition)
- 3 days per week (M, W, F) \$195 per month x 9 months (\$1755 total tuition)
- 4 days per week (M, Tu, W, F) \$245 per month x 9 months (\$2205 total tuition)
- 4 days per week (M, W, Th, F) \$245 per month x 9 months (\$2205 total tuition)
- 5 days per week (M, Tu, W, Th, F) \$295 per month x 9 months (\$2655 total tuition)

Child's Name _____ M/F _____ Birthdate _____
By what name should we call your child at school? _____
Child's Address (include zip code) _____

Parent Information

Father's Name _____
Address if different from child's _____
Training or Profession (whether currently working or not): _____
Current Occupation _____
Home phone _____ Business phone _____ Cell _____
Email address _____

Mother's Name _____
Address if different from child's _____
Training or Profession (whether currently working or not): _____
Current Occupation _____
Home phone _____ Business phone _____ Cell _____
Email address _____

Parent's Marital Status: ___ Married ___ Divorced ___ Separated ___ Other

Who cares for the child during working hours? _____

Family Life

Other children in the family

Name	Age	Grade	Sex
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Family religious preference or affiliation:

Is your child adopted? _____ At what age? _____
Has he/she been informed? _____

Social Behavior

How does your child get along with adults? _____

Does your child play with other children? _____

Is sharing and taking turns difficult? _____

Does he/she play well alone? _____

Does he/she like quiet, or more active play? _____

Does your child have any pets? _____ If so, what kind? _____

Will your child be attending any other school such as ballet class, Sunday school, etc. this year? _____

What previous group experience has the child had and what was his/her reaction? _____

What are his/her favorite T.V. programs? _____

How much T.V. does he/she watch daily? _____

How do you usually discipline your child? _____

How does he/she respond to babysitters? _____

Does he/she have any special fears? _____

Developmental History

Eating:

Appetite? _____

Problems? _____

Food Allergies? _____

(If food allergies are listed, please ask for an emergency medical plan form)

Sleeping:

Usual time to bed? _____ Time to rise? _____

Problems? _____

Does he/she nap? _____ or rest? _____

Has there been an unduly stressful situation which has occurred in your life that you would like to share with us?

How has your child reacted to it? _____

What are your expectations for how preschool can benefit your child?

How can we help? _____

What else do we need to know about your child?

(Use back of page if necessary)

Who answered this questionnaire? _____

Our class roster is distributed only to the teachers and current student's parents. Knowing this, may we print your name, address, email and phone number in the class roster? Yes/No

If yes, how would you like for your names to appear?

Child's Name _____

Parent's Name(s) _____

How did you hear about Covenant Preschool? _____

Thank you for taking the time to complete this form. The information will help us to understand your child and meet his/her needs better. **This information will be confidential and will be used only by our school staff.**

FOR OFFICE USE ONLY:

Child's Name: _____ **DOB:** _____

Days per week _____ Day preferences _____

Date Received: _____ App. /Supply Fee Received: _____

Check # _____ Confirmation Email Sent _____

Summer Mailing Sent: _____