

WILSON UNIVERSAL PRE-KINDERGARTEN

Wilson Elementary School
430 Young Street
Wilson, New York 14172

St. Peter Lutheran School
4169 Church Road
Lockport, New York 14094

Child: _____
 Last Name First Name MI. Sex D.O.B.

 Telephone Handicapped (Yes/No) Race Main Language Spoken in Household

 Street Address - Apt. # P.O. Box City State Zip

**Father/
Guardian** _____
 Last Name First Name D.O.B.

 Street Address - Apt. # P.O. Box City State Zip Telephone

 Lives in Household Yes _____ No _____

**Mother/
Guardian** _____
 Last Name First Name D.O.B.

 Street Address - Apt. # P.O. Box City State Zip Telephone

 Lives in Household Yes _____ No _____

<u>Marital Status</u>	<u>Education</u> (Highest Grade Completed)	<u>Where Employed</u>	<u>Telephone</u>
Single _____	Father _____	Father _____ F/T P/T	_____
Married _____	Mother _____	Mother _____ F/T P/T	_____
Divorced _____			
Separated _____	<u>Presently in School</u>	Father _____ F/T P/T	
Widowed _____	<u>or Training</u>	Mother _____ F/T P/T	

Number of Persons in Household

_____	_____	_____	_____	_____	_____
# Adults	# Children	# Total Household	# Handicapped Adults	# Handicapped Children	# Disabled Parents

Is there a chronic illness of a parent/family member? Yes _____ No _____

IN CASE A PARENT OR GUARDIAN CAN'T BE REACHED, WE WOULD LIKE THE NAMES OF TWO RELATIVES OR NEIGHBORS WHO WOULD TAKE RESPONSIBILITY FOR YOUR CHILD DURING AN EMERGENCY.

Name _____	Address _____	Telephone _____	Relationship _____
Name _____	Address _____	Telephone _____	Relationship _____

Other Children in Household:

<u>Last Name</u>	<u>First Name</u>	<u>Sex</u>	<u>Age</u>	<u>Grade Level</u>	<u>DOB</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Child Currently Lives with: (Check all applicable)

Mother Father Grandmother Grandfather
 Step-Mother Step-Father Aunt Uncle Foster Parent

How long has child lived with adults checked above? _____

Describe Your Child's Residence:

Single Family Home Duplex Apartment Trailer Rent Own

How long have you lived at your present address? _____

How long have you lived in the Wilson District? _____

Are you currently using other day care for a child you wish to enroll? Yes No
If yes, name of the program. _____

Are you currently receiving day care subsidy? Yes No

Is your child currently receiving any other early childhood services? Yes No
If yes, name of the program. _____

How did you hear about the Wilson Pre-Kindergarten Program? _____

Please indicate your locations preference. An effort will be made to accommodate preferences. However, there is no guarantee on location placement.

Wilson Elementary St. Peter at North Ridge

STATEMENT OF UNDERSTANDING

Wilson Pre-Kindergarten

- ❖ I/We understand that:
 - ❖ CHILDREN, WHO ARE RESIDENTS OF THE WILSON CENTRAL SCHOOL DISTRICT AND WHO ARE FOUR (4) YEARS OF AGE ON OR BEFORE DECEMBER 1 OF THE NEW SCHOOL YEAR ARE ELIGIBLE TO APPLY.
 - ❖ OUR UNIVERSAL PRE-KINDERGARTEN CLASSES WILL BE HELD AT WILSON ELEMENTARY AND AT ST. PETER AT NORTH RIDGE. THEY WOULD TENTATIVELY BE MORNING PROGRAMS. OTHER SPECIFICS OF THE PROGRAM WILL BE CONFIRMED AT A LATER DATE.
 - ❖ PLEASE INDICATE YOUR SITE PREFERENCE ON THE APPLICATION. AN EFFORT WILL BE MADE TO ACCOMMODATE PREFERENCES. ACCEPTANCE INTO THE PROGRAM GIVES CHILDREN ACCESS TO OUR PRE-KINDERGARTEN PROGRAM, NOT A SPECIFIC LOCATION OR SESSION.
 - ❖ A RANDOM SELECTION PROCESS MAY BE USED TO DETERMINE ACCEPTANCE INTO THE PROGRAM AND LOCATION, IF NEEDED.
- ❖ **PLEASE RETURN ALL COMPLETED APPLICATIONS TO THE WILSON ELEMENTARY MAIN OFFICE PRIOR TO MAY 31, 2017.**
- ❖ *It is important to remember that our Universal Prekindergarten program is a grant program funded by the New York State Education Department. We are dependent on that funding to operate the program and changes in our state budget could impact our program.*

THIS APPLICATION WILL NOT BE CONSIDERED IF THIS STATEMENT IS NOT SIGNED.

Signature of Parent/Guardian

Signature of Parent/Guardian

The application deadline is MAY 31, 2017.

YOU WILL BE REQUIRED TO PROVIDE THE FOLLOWING FOR THE WILSON PRE-KINDERGARTEN PROGRAM ALONG WITH YOUR APPLICATION.

- Child's original Birth Certificate or Baptismal Certificate
- The child's immunization record and physical
- Verification of Residency in the Wilson Central School District
- Custody Papers (if applicable)
- Registration Papers, Home Language and Residency Questionnaires

TELL US ABOUT YOUR CHILD

1. What hand does your child use? (Check all applicable)

Right _____ Left _____ Both _____

2. What age did your child walk? _____ Talk? _____

3. When was your child toilet trained? _____

4. What activities does your child enjoy? _____

5. Does your child have any medical problems? _____

6. Do you have a religious belief that would prohibit your child from participating in some of our activities?

Yes _____ No _____ (If Yes, explain) _____

PLEASE WRITE ANY OTHER INFORMATION YOU WOULD LIKE US TO KNOW BELOW:

