The Children's Center, Inc. Application



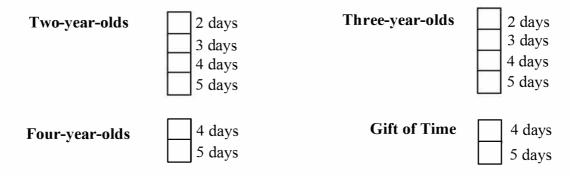
What name does your child prefer?

Child's full name:							
Birthdate:	Age on Aug 31st of the new school year they are starting	yrs	mos. Gender:				
Address:	Z	Zip: tel					
Parent Address (if different):			Zip:				
Email address(s):							
Parent name:		Occupation:					
Business name and address:		tel					
Parent name:	Occupation:						
Business name and address:			tel				
Parents: Married	Separated Divorced Ot	her:					
Age and sex of siblings:							
Have any attended the Childr	en's Center? Please give names and	1 dates:					
List other members of the ho	usehold:						
Primary language spoken at l	nome? Any o	ther language	s?				
Has your child had any group	o experience? Please list date, place	, and type:					
Does s/he have special intere	sts?						
Health - general condition:							
	gies, nosebleeds, etc.)						
Are there any limitations (spe	eech, vision, hearing, coordination)	?					
Children <i>should</i> be completed	ly toilet trained before entering the	Center. (N/A fo	or 2s) Will this be a problem?				
Describe your child in a few	words or phrases. Please include so	ocial, emotion	al, physical and intellectual				
characteristics:							

Are there any fears?
What would you like your child to gain from a preschool experience?
Anything else you wish share about your child?

The following programs are available. Please check your preference for number of days per week. (The *Children's Center* reserves the responsibility for final appropriate placement.)

Primary Half-Day Programs (8:45 to 11:45 a.m. preschool)



Extended Day (7:30 a.m. -1:30 p.m., includes a.m. preschool session) Space in the Extended Day Program may be limited, or not available, if there is insufficient participation to justify staffing requirements. Early room or Extended Day is not available for Two-year-olds until they turn Three.

Early Room: 7:30 to 8:45 a.m.	M			Ē
Pick-up: 1:30 p.m.		W	<u>Th</u>	Ē

I have been informed of The Children's Center's discipline policies and have been given the opportunity to discuss them with the director(s).

Date _____

Parent Signature

Please return this application and include a <u>non-refundable application fee of \$60.00</u> to: (one application fee per family)

The Children's Center, Inc.

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