

La Costa Valley Preschool & Kindergarten

www.lacostavalleypreschool.com

o 2276 Calle Barcelona o Carlsbad, CA 92009 o Phone: (760) 436-2797 o FAX: (760) 436-3613

Accredited By The National Academy Of Early Childhood Programs

ENROLLMENT APPLICATION

Child's Name _____	Date of Birth _____ Age _____
Parent's Name _____	Parent's Name _____
Address _____	Address _____
City, State, Zip _____	City, State, Zip _____
Email Address: _____	Email Address: _____
Hm Phone _____ Cell _____	Hm Phone _____ Cell _____
Wk Phone _____ Pager _____	Wk Phone _____ Pager _____

PROGRAM APPLYING FOR:

_____ Half Day Preschool/Pre-K (8:30 am - 12:00 pm)	_____ Customized Full Day Preschool/Pre-K
_____ * 2 Year Early Entry Kindergarten program	_____ * Kindergarten

**Educational Enrichment programs for children demonstrating preschool and academic readiness.*

DESIRED WEEKLY SCHEDULE:

FIRST CHOICE:

2 Days T,Th _____
3 days M,W,F _____
5 Days M-F _____

SECOND CHOICE:

2 Days T, Th _____
3 Days M,W,F _____
5 Days M-F _____

STANDARD KINDERGARTEN SCHEDULE:

Kindergarten & Early Entry Kindergarten M-F _____

Nurturing & Educating North County's Children Since 1991

APPLICATION QUESTIONNAIRE

Please answer the following questions and provide specific information and examples as appropriate.

1. Please list your child's preschool or other group experience including dates of attendance, school's name, type of program and any other pertinent information.
2. Why are you interested in enrolling your child?
3. Why do you feel your child would excel in this program? Please explain and give examples.
4. What preschool activities does your child enjoy most?
5. What home activities does your child enjoy most?
6. Can your child follow directions?
7. Does your child like puzzles, legos, hidden picture books, blocks? Explain.
8. Please explain your observation of your child's listening skills in one-on-one and group situations.
9. Please provide us with a glimpse of how you view your child's personality and interests.
10. A commitment to arriving on time for sessions and participation in "at home" activities is an integral part of this program. At home activities are not excessive, yet help facilitate ongoing learning. Is this acceptable to you?
11. Please feel free to add any additional thoughts about your child.

I, _____ parent of _____ am applying for membership in LCVPS&K preschool enrichment programs for youngsters demonstrating preschool and academic readiness.

Signature _____ Date _____