

◆◆PRESCHOOL◆◆

ST. PHILIP CATHOLIC SCHOOL PRESCHOOL PROGRAM

HOME PARISH: \_\_\_\_\_

FAMILY  
NAME: \_\_\_\_\_

**INFORMATION RECEIVED**

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

Child's Full  
Name: \_\_\_\_\_

**STUDENT INFORMATION**

(Age by August 1st)

3 yrs.     4 yrs.

Baptism Date &  
Location: \_\_\_\_\_

Elementary School to  
Attend: \_\_\_\_\_

Child's first name he/she should learn to write:  
\_\_\_\_\_

**STUDENT PERSONALITY INFORMATION**

Date of  
Birth: \_\_\_\_\_

(Age by August 1st)

Right     Left

Child's hand preference:  Right     Left

**Group activities your child attends or has  
attended in the last year (i.e., library story  
hour, Sunday School, swim lessons, daycare,  
etc):**

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attended in the last year (i.e., library story  
hour, Sunday School, swim lessons, daycare,  
etc):**

**Please list any information that will help make  
your child's experience at preschool more  
enjoyable (i.e., health or social difficulties,  
fears, likes or dislikes, etc.)**

**PROGRAM SELECTION**

<input type="checkbox"/> T/W/Th Class 7:30-10:30am	<input type="checkbox"/> T/W/Th + Enrichment 7:30-2:30pm	<input type="checkbox"/> M-F Class 7:30-10:30am	<input type="checkbox"/> M-F + Enrichment 7:30 - 2:30pm	<input type="checkbox"/> M - F + Enrichment + After School Care 7:30 - 6:00pm
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**Only Tuesdays, Wednesdays & Thursdays include class instructional time from 7:30-10:30am.**

IN THE EVENT WE ARE ABLE TO SPLIT THE PRESCHOOL CLASS  
DUE TO SIZE, WHAT WOULD YOUR PREFERENCE BE:

Morning Class     Afternoon Class