

Application for Admission		Date of Application:		
Name:			Birth Date:	
Last	First	Middle		
Name your child wishes t	o use at school:			
Languages spoken at hor	ne:			
Family Information				
Parent/Guardian Name #	1:			
Address:				
Street/Apt.		City		Zip Code
Home Phone ()	Cell Phone ()	· `	Work Phone ()	
E-mail Address:				
Occupation:	Employer:			
Parent/Guardian Name #	2:			
Address (if different from	n above)			
,	Street/Apt.		City	Zip Code
Home Phone ()	Cell Phone (	)	Work Phone(	)
E-mail Address				
Occupation:		Employe	r:	

## **Applicant's Sibling Information**

Name:	Age:	School:
Name:	Age:	School:
Name:	Age:	School:

## **Parent Questionnaire**

How would you describe your child's interactions with other children in a group setting?

What would you describe as your child's primary strengths?

What do you consider your child's challenges at this time?

Please share your goals for your child in a school setting (social-emotional, academic, friendship building, etc...)

From the list below,	what traits be	est describe your	child's personality	(circle all that apply)
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Spirited	Stubborn	Lively	Calm	Shy	Dramatic
Assertive	Diligent	Fragile	Confident	Compliant	Intense
Jovial	Independent	Cautious	Observant	Easy Going	Talkative
Perfectionist	Impulsive				_

We will review applications on a dated basis and will offer spots in a timely fashion. Please sign, date and scan the application and email to: <u>nurturepreschoolseattle@gmail.com</u>.

I certify that the information provided in this application accurately and fully discloses all information pertinent to my child's personal and educational development. Nurture Preschool has permission to receive confidential information regarding this applicant and to share this information with staff as deemed appropriate to the admissions process.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

Thank you for your interest in Nurture Preschool, we look forward to meeting you and your child!