

## Preschool Students Questionnaire

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Gender: \_\_\_\_\_ Current Age: \_\_\_\_\_

Student Address: \_\_\_\_\_ City \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Does your family attend church regularly?  Yes  No

Does your child attend Sunday school regularly?  Yes  No

Has your child previously attended preschool?  Yes  No

Name of school: \_\_\_\_\_ Dates: \_\_\_\_\_

Is your child currently attending preschool?  Yes  No

If yes, name of school: \_\_\_\_\_

Is your child potty-trained?  Yes How long: \_\_\_\_\_  No

Desired preschool schedule: \_\_\_\_\_ 2 days (Tues./Thurs.)  
\_\_\_\_\_ 3 days (Mon./Wed./Fri.)  
\_\_\_\_\_ 5 days (Mon.-Fri.)

\_\_\_\_\_ Half days: 8:30-12:30  
\_\_\_\_\_ Full days: 8:30-3:00

Preschool 3-year old-program \_\_\_\_\_ Pre-Kindergarten 4-year-old program \_\_\_\_\_

Morning Childcare: \_\_\_\_\_ 7:00-8:00 AM

After School Childcare: \_\_\_\_\_ 3:00-5:00 PM

For an additional fee and availability, special schedules may be accommodated.

### **School Age Requirements, children must be:**

3 by September 1st and fully potty-trained for Preschool

4 by September 1st for Pre-Kindergarten

5 by September 1st for Kindergarten