



# The Children's Preschool

## Application for Admission 2024–25

**The Children's Preschool**  
608 Whitney Avenue  
New Haven, Connecticut 06511

Tel (203) 777-2491  
Fax (203) 889-3179  
[www.thechildrenspreschool.org](http://www.thechildrenspreschool.org)

**Andrew Myers**  
Director  
[director@thechildrenspreschool.org](mailto:director@thechildrenspreschool.org)

Page 1 of 2

### INSTRUCTIONS

Please download the 2-page pdf application, complete in Acrobat, save and e-mail to the director, Andrew Myers. Alternatively, print the pdf, complete and return by mail or fax to the address above.

### Child

|                     |       |               |            |
|---------------------|-------|---------------|------------|
| Name                | Sex   | Date of birth |            |
| Home address Street |       | Apt. no.      |            |
| City                | State | ZIP           | Home phone |

### Parent

|                         |            |          |            |
|-------------------------|------------|----------|------------|
| Name                    | Occupation |          |            |
| Home address Street     |            | Apt. no. |            |
| City                    | State      | ZIP      | Home phone |
| E-mail                  |            |          | Cell phone |
| Business name           |            |          |            |
| Business address Street |            |          |            |
| City                    | State      | ZIP      | Work phone |

### Parent

|                         |            |          |            |
|-------------------------|------------|----------|------------|
| Name                    | Occupation |          |            |
| Home address Street     |            | Apt. no. |            |
| City                    | State      | ZIP      | Home phone |
| E-mail                  |            |          | Cell phone |
| Business name           |            |          |            |
| Business address Street |            |          |            |
| City                    | State      | ZIP      | Work phone |

### Siblings

|      |     |                |
|------|-----|----------------|
| Name | Age | Current school |
| Name | Age | Current school |
| Name | Age | Current school |

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### Child's Background

| Program name | City | Dates attended |
|--------------|------|----------------|
|--------------|------|----------------|

| Program name | City | Dates attended |
|--------------|------|----------------|
|--------------|------|----------------|

Please share with us any important information regarding your child's physical or emotional development.

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### In which program are you interested in enrolling your child?

- Morning Program (8 am –1 pm)
- Full Day Program (8 am–5:15 pm) Pick up anytime after 2:30 pm
- Shared Time (5 mornings, M–F and up to 4 afternoons).  
Please check your preferred afternoons:  Mon  Tue  Wed  Thu  Fri
- Summer Program

### How did you hear about The Children's Preschool?

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### Duties

Parents share administrative and maintenance duties for the preschool.  
Please let us know which skills and special interests you might contribute to the cooperative.

- Admissions
  - Tech Support
  - Music
  - Sewing
  - Book Repair/Library
  - Equipment Repair
  - Personnel
  - Gardening
  - Carpentry
  - Finance
  - Photography
  - Occasional help with shoveling/raking
  - Class Participation
  - Fundraising
  - Publicity/Graphic Design
- Other \_\_\_\_\_

My permission is given for **The Children's Preschool** to consult the staff of my child's previous group or caregiver.  Yes  No

- I would like to apply for financial aid.

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date