Enfield Public Schools Pre-Kindergarten Application

The Enfield Public Schools Preschool Program meets 5 days per week and operates during the regular school year. Both morning and afternoon sessions are offered. The Preschool Program is developmental in nature and operates based on the CT Preschool Frameworks and the Enfield Board of Education's' approved Preschool Curriculum. Peer partners are selected through a developmental screening process. You will be contacted by the preschool team once your application is processed.

There is an annual material	s fee of \$600 (subject to chang	ge).			
For more information conta	ict Julie Carr	oll, Director of F	Pupil Services, a	t 860-253-6519.		•
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Cut on dotted line and ma Building, 27 Shaker Road, I			od Program, c/	o Pupil Services, Enfield	Public Schools, A	dministration
PLEASE TYPE OR PRINT	,					
For School Year: Fall		_				
Child's Name				Date of Birth		· ·
(First Nam	ie) (Mid	dle Name)	(Last Name)			
Gender: N	Male	_ Female	V			
Street Address						
Email Address:						<u> </u>
City/Town						
Parent(s) Name(s)				•	······································	<u> </u>
Telephone Number		4 1 2				·
What elementary school wil	ll your child b	e attending?			······································	· · · · · · · · · · · · · · · · · · ·
Has your child received or i	is he/she curre	ently receiving a	ny special educ	ation services? (i.e. OT/P)	f, Speech)	1 - 14
	Yes	No				
Is your child toilet trained?	Yes	No				
Language spoken at home?						
Please circle which session y	you would pre	efer your child to	o attend. We w	ill try to grant your reque	st but we <u>cannot g</u> u	<u>uarantee</u> it.
	AM	PM	***************************************			
***The child must be 3 year	rs old by Apri	il 1 ST .				e +

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