

COLUMBIA ACADEMY PRESCHOOL APPLICATION

Please fill out the following information and enclose a \$50.00 application fee per student. This is a one-time/ non-refundable fee and does not guarantee a spot; it only puts you on our enrollment/waiting list. Feel free to contact us to schedule a school visit. Thank you!

Full Name of Child _____ Preferred Name _____

D.O.B. _____ Race _____ Sex _____

FATHER

MOTHER

Name _____ Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Home Phone _____ Home Phone _____

Phone _____ Phone _____

Other Contacts (cells, e-mails, etc.) _____

Occupation _____ Occupation _____

Employer _____ Employer _____

Work Phone _____ Work Phone _____

Phone _____ Phone _____

With whom does student live? (circle) Father, Mother, *Other (please explain and specify relationship, full name and address) _____

Church affiliation of parents _____

Name of congregation attended _____

EMERGENCY INFORMATION: Person authorized to act for parent in an emergency

Name _____ Phone _____

Cell Phone _____ Work Phone _____

Physician _____ Phone _____

EXPERIENCE WITH OTHERS

What are some ways in which child plays at home? _____

Does he play with other families? _____

Does he usually get his own way? _____

If not, how does he react? _____

Is the entire family together for any time during the day? _____

List the preschool/day cares that your child has attended beginning with present school:

1. _____

2. _____

EATING HABITS

What is his general attitude toward eating? _____

If he refuses to eat, how is this handled and by whom? _____

Favorite foods: _____

Disliked foods: _____

SLEEP HABITS

Has room alone _____ Shares w/other children _____ Room w/parents _____

At night sleeps from _____ to _____. Average hours _____

Attitude toward going to bed _____

Is there difficulty – how is this handled? _____

Does he wet the bed? _____ At naptime? _____ At night? _____

If so, how is the problem handled? _____

TOILET HABITS

Time at which child is taken to the bathroom _____

Does he take himself? _____ Time of bowel movement? _____ Regular? _____

Constipated? _____ Does he tell you when he needs to go to the toilet and go willingly? _____

Can he manage his clothes himself at the toilet? _____ What word does he use for urinating? _____ Bowel movement? _____

SPEECH AND PHYSICAL GROWTH

Does he talk well? _____ Fairly well? _____ Indistinctly? _____ Not at all? _____

Does anyone read to him? _____ How regularly? _____

Would you describe him as active or quiet; thin, average weight or heavy; tall, average height, or short; friendly or unfriendly? _____

Relatives attending CA: _____

OTHER CHILDREN IN FAMILY

<u>Name</u>	<u>DOB</u>	<u>School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Give below any other information you think we should have about your child:

REASON FOR CHOOSING CA PRESCHOOL: _____

The Director will screen each application before final acceptance. Columbia Academy admits students without regard to race, color, religion, sex, nationality or ethnic origin.

Signature of parent or guardian Date