Enrollment Form Mount Calvary Preschool 301 County Road 19 Excelsior, MN 55331 952/474-5542

Child's name:			Nickname:_		Birthday//_	
First	Middle	Last			•	
Father's name:		I	Mother's name:			
Father's address:		·	Mother's address:			
City/State/Zip			City/State/Zip			
City/State/ZipHome phone:/	/	H	Home phone:	/	_/	
Cell phone:/	/		Cell Phone:	/	/	
Father's occupation:		Mot	ther's occupation:_			
Father's occupation: Work phone:/	/		Work phone:	/	/	
E-mail address to receive	school informat	ion				
Siblings: (names, ages, sex	(es)					
Others in family home						
Has the child had any grou	ıp play experier	nce?				
Does child have neighborh						
How does your child react when s/he separates from you?						
Suggestions to help us help your child during separation anxieties						
What time does your child	usually go to b	oed?	Awaken	n?	Nap?	
Does your child sleep well	l?					
Is your child potty trained	?	Word for	urinating?	Bow	el movement?	
What are your child's favo						
What are your child's favo	rite outdoor act	ivities?				
What are your child's favo	rite toys?					
Does your child have any	special needs?_					
Does your child have anything not mentioned that we should be aware of?						
How would you describe y	your child's pers	sonality?				
Is there any language othe						
Does your child have: dial						
vomits easily run						
nosebleedsOther				· · ·		
Has your child been stung						_
Does your child wear corr						
Does your child have any special dietary needs?						
Please give a statement of your evaluation of your child's health						
5		<i>y</i>				

Please be ready to discuss this form with your teacher at your child's Preterm Conference in early September. Teachers do gain information about the ways families define their own race, religion, home language, culture and family structure. If you feel any of this information would be pertinent to your child's success at preschool, please discuss these topics with your child's teachers. Also, know that these discussions will remain confidential if deemed necessary by parents/guardians.

Discussion with teacher (feel free to write on the back of this form):