

Seahorse Pre-Kindergarten Application 2016 - 17 School Year

APPLICATION & ENROLLMENT PROCESS

All applicants are encouraged to attend an **Open House** *(Children Welcome)* or **A Private Tour** *(Adults Only)* and learn more about our school. Please call 941.927.3711 to reserve your space.

- 1. Submit an application and the non-refundable \$40 application fee. (This fee is waived if application is submitted within 2 days of an enrollment event)
- 2. You will be contacted for a meeting with the class teacher.
- 3. You will receive an enrollment packet after your child is accepted into the program.
- 4. Return the completed enrollment packet paperwork along with the \$100 tuition deposit; and, if applicable, tuition payment information (TADS) in order to secure a place for your child.

The school maintains a waiting list for classes that are full. To be placed on this list, applicants must submit a completed application and the \$40 application fee.

Please complete & return with a non-refundable \$40 APPLICATION FEE, check payable to: Sarasota Waldorf, Inc., 6210 Crestwood Ave., Sarasota, FL 34231

Seahorse Pre-Kindergarten Program:

8:30 am- 1 pm Ages 4- 5 1/2 Choose one: 3 Day – Mon - Wed □ 5 Day – Mon - Fri □

For Office Use Only:	App. fee received
Date received	Recorded by
Forwarded to faculty _	

6210 Crestwood Avenue Sarasota, FL 34231 941.927.3711 Fax 941.927.2006

STUDENT INFORMATION

Student Full Name:

Student Birth Date: _	/	/	
□ Girl □ Boy			
Student Address:			

State

Zip

PAYMENT METHODS

City

Full Payment of Tuition on or before July 1, or **Ten Equal Monthly Payments** commencing July 1, with mail in or direct withdrawal options through TADS. The application to pay using the TADS biannual or monthly payment plan must be completed and returned by June 15th. The Supply Fee can be paid in one or two payments, by July 1st, and is non-refundable.

The calendar, tuition rates, and fees are subject to change.

What method will you use to pay tuition?

☐ Payment in Full by July 1, 2015

☐ Ten Monthly Payments beginning July 1, 2015

I understand that although tuition can be broken into monthly payments for affordability, it is not a month to month obligation, rather an annual commitment.

		Email Address:
Parent/Guardian Signature	Date	Occupation:
Parent/Guardian Signature	Date	Place of Work:
PARENT/GUARDIAN INFORMATION Parent 1 Name:		Relationship of Parents:
raient i Name.		□ Married □ Divorced □ Separated □ Co-habiting
Address (if different from above):		If separated or divorced, please describe co-parenting/custody arrangement:
Phone Numbers:		Child lives with:
(W	<i>(</i>)	☐ Both Parents ☐ Parent 1 ☐ Parent 2 ☐ Other
(C	•	If your child lives with anyone other than parent(s), pleas explain:
Email Address:		
Occupation:		Does any other person care for your child on a regular basis?
Place of Work:		□ Yes □ No
		Car egiver's Name Phone
Parent 2 Name:		Caregiver's Relationship to Child
Address (if different from above):		Siblings:
		Sibling 1 Name Age D.O.B. School
Phone Numbers:		Sibling 2 Name Age D.O.B. School
(W	<i>(</i>)	
(C		Sibling 3 Name Age D.O.B. School
(H)	Schools Previously Attended (Including preschools):

School 1 Name and Address	
School 1 Contact Name and Phone	Does your child nap? ☐ Yes ☐ No If Yes, how long?
School 2 Name and Address	Why do you want your child to experience Waldorf education?
School 2 Contact Name and Phone	
If moving from a previous school, please explain why:	How did you hear of Waldorf Sarasota?
	☐ Website ☐ Mailing ☐ Friend ☐ Newspaper ☐ Magazine ☐ Open House ☐ Event ☐ Other If "Other", how:
If your child was adopted, at what age? Under what circumstances?	Are you acquainted with anyone currently in the school?
Was the child premature? ☐ Yes ☐ No If Yes, how early? At what age did your child crawl? walk? speak?	Parents/guardians are actively involved in the life of our school. All are expected to volunteer a minimum of 20 hours per school year and participate in at least one school work day. Please list your interests, experience, talents, etc.
When was your child toilet trained? Does your child wet the bed? □ Yes □ No If yes, under what circumstances?	
Please describe your family's relationship to spiritual life:	Anything that would be helpful for us to know concerning your child's early development not mentioned so far?
Please describe activities or rituals between dinner and bedtime:	
How many hours does your child sleep each night?	Please describe your child's strengths and challenges:

	How many hours per day does your child spend with electronic media, including television, videos, cinema, radio, recorded music and stories, videogames, and computers? (Please indicate average hours of viewing and/or listening and content. Include differences between weekdays and weekend days, if relevant.)
	
	
Does your child have strong food preferences or dislikes?	Does your child have pets? If yes, please list:
	
Does your child have any health/medical conditions that the school should be aware of in order to ensure the	Does your child like playing alone? ☐ Yes ☐ No Please describe play:
child's safety? If so, please explain and attach any medical documents.	
	·
	What kinds of play and toys does your child enjoy most?
	List any extracurricular activities your child participates in (sports, martial arts, dance, music). Indicate hours per week:
Has your child ever had a social, neurological,	
emotional, or other evaluation? Does your child have an IEP? If so, please explain and attach the testing results or latest IEP plan.	
	Does your child have any unusual behaviors or habits that the teachers should be aware of? Please describe.
	Please describe your approach to discipline. How does your child respond to your approach?

	
What activities does your family do together that your child enjoys?	What are your intentions for your child's schooling after Pre-Kindergarten?
Please describe home life or attitudes that you consider different or unique:	