



**St. Charles Borromeo
Preschool Application
2021 - 2022**

STUDENT & FAMILY INFORMATION

Child's name: _____ Date of Birth _____

_____ Male _____ Female Place of Birth: _____
Country City State

Mother/Guardian Name: _____
Last (Maiden) First Home Phone Number

Address: _____
Street Address City/Zip Home Phone Cell Phone Number

Father/Guardian Name: _____
Last First Home Phone Number

Address: _____
Street Address City/Zip Home Phone Cell Phone Number

Parents are: _____ Single _____ Married _____ *Separated _____ *Divorced _____ Widowed

Child primarily resides _____ Father/Mother _____ Mother _____ Father
with: _____ Mother/Stepfather _____ Father/Stepmother _____ Other

* Custody agreement must be provided upon acceptance

PARISH AFFILIATION

Religion _____ Parish _____

Baptism: _____
Date Church City

_____ My child is not baptized Catholic. My child is baptized _____
A copy of your child's baptismal certificate must be turned in with registration (if applicable)

CLASSROOM PREFERENCE

Twenty students can be accepted into each of our preschool sessions. To assist in your child's placement please indicate your session preference (1, 2 and 3) below. Final program assignment will be determined by the screening committee.

Three Day Program (four and five year-olds)
Monday – Wednesday - Friday

_____ Morning (8:15 – 10:45)

_____ Afternoon (11:30 – 2:00)

Two Day Program (Three and young four year-olds)
Tuesday – Thursday

_____ Morning (8:15 – 10:45)

_____ Afternoon (11:30 – 2:00)

APPLICATION CHECKLIST

Applications for admission are reviewed upon receipt of **all** of the following items:

_____ Admissions application

_____ Birth certificate (copy)

_____ Baptismal Certificate (if applicable)

_____ Information sheet

_____ School Health Questionnaire

_____ Proof of residence (utility bill, etc.)

_____ Copy of custody/guardian papers

(if applicable)

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INFORMATION SHEET

Child's Name: _____ Birth Date: _____

1. Does your child have any physical problems that we should be aware of such as allergy, hearing or vision problem? _____

Speech problem? _____

2. Are there any family situations we need to be aware of (pending divorce, loss of job, custody arrangements, etc.)? _____

3. Has your child attended a preschool prior to this one? _____
If so, what school? _____

4. Has your child attended a library story hour? _____

5. Is a language other than English spoken at home? _____

6. Does your child have playmates his/her own age? _____

7. Does your child have a nickname that he/she prefers to be called? _____

8. Does your child have fears that we should be aware of? _____

9. Names and ages of siblings:

_____	_____
_____	_____
_____	_____

Additional comments or information about your child that you think might be helpful to us serving your child better (new baby, family moving, recent death in family, etc.):

Parent name: _____ Email address: _____

_____ Email address: _____

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**Saint Charles Borromeo School
Preschool Tuition 2021 - 2022**

Dear School Parent,

January 2021

Your monthly **Preschool** tuition payment for the 2021-2022 school year will be automatically deducted from either your checking or savings account beginning in September 2021.

Please fill out the form below completely and return it with your Preschool Application form.

If you have any questions, please call Tom Holzheimer at the Parish Business Office (440)884-3030.

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Automatic Funds Transfer – School Tuition

This form authorizes Saint Charles Borromeo Parish to transfer funds from my account. This authorization will remain in full force and effect until notice is given of termination.

ACCOUNT INFORMATION: _____Checking _____Savings

Bank Name: _____

Bank Transit / ABA Number _____
(9 digit number in the lower left hand corner of your checks)

Bank Account Number _____

Amount to be transferred _____

_____Monthly (1st) _____Monthly (20th)

*****A \$10 service charge will be assessed for all NSF fund notifications.**

Please attach a voided check for the desired checking account destination.

Family Name: _____

Address: _____

Phone: _____ Date: _____

Signature: _____

3 day per week program: \$155.56 per month (Sept-May) \$1400 per year

2 day per week program: \$127.78 per month (Sept-May) \$1150 per year