Kootenai Preschool Application Form 2022-2023

Child's Name					
Last		First		Middle	
Boy 🗖 Girl 🗖 Age by September 1, 2022		Class (Priority given to 4 year olds preparing for Kindergarten): Pre-K (4 yr olds)			
Date of birth	F	Ethnicity			
Mother's Name (Last)	(First)				
Address		City/State	Zip	Home Phone	
Occupation	Employer		Work Phone	Cell Phone	
Father's Name (Last)	(First)				
Address (if different)		City/State	Zip	Home Phone	
Occupation	Employer		Work Phone	Cell Phone	
Name of Guardian (if applicable) Address			Home Phone		
Please provide us with your mo E-mail address					
Children must be toilet trained t	o enter preschool. I	Does your child t	ake total responsibi	lity for his/her toilet nee	
Yes□ No	If no, please exp	If no, please explain			
Previous preschool experience _					
Emergency Contacts:					
Name:	Relationship to Child		Phone Number:		
Name:	Relationship to Child		Phone Number:		
Name:	Relationship to Child		Phone Number		

Preschool Parent Questionnaire 2022-2023

Thank you for taking the time to complete this questionnaire. All information is confidential. You are the greatest resource in providing us with information about your child and therefore helping us to better serve him/her. Please feel free to attach additional sheets to this page, if necessary.

Please complete this form and return it with the Preschool Application.

5.) Please comment on your child's eating habits/ food allergies.
6.) Please comment on your child's dislikes or fears.
7.) Please comment on your child's behavior and/or the discipline style that your child responds best to.
8.) Has your child been tested for or diagnosed with a disability? Yes No No
If yes, please explain
Please attach the most recent copy of your child's report and any additional documentation, such as an Individualized Education Plan.
9.) Does your child need any special accommodations?
Yes□ No □ If yes, please explain
10.) Is there any additional information that you'd like to add?