

MONTGOMERY TOWNSHIP BOARD OF EDUCATION

1016 Route 601, Skillman, NJ 08558-2112

OFFICE OF PUPIL SERVICES

Cubs Club Preschool Application 2019 - 2020 School Year

Session: _____ 9:20 am - 12:10 pm (3 year old) _____ 1:10 pm - 3:50 pm (4 year old)

_____ M _____ F _____
Child's Last Name Child's First Name

_____ place of birth (country, state, city)
Date of Birth Home Phone

_____ City Zip
Street Address

_____ Father/Guardian Name
Mother/Guardian Name

_____ e-mail cell phone e-mail cell phone
cell phone e-mail

Does your child have any allergies or other health issues? Yes _____ No _____

If yes, please explain: _____

If your child had a sibling who participated in the Cubs Club program, please complete:

Name of sibling _____ School year attended _____

*****All students must be toilet trained. Students who are not toilet trained will not be accepted into the program or be able to remain in the program.***

- Applications should be returned to Jennifer Rogers at Orchard Hill Elementary School, 244 Orchard Road, Skillman, NJ 08558
- If your child is offered placement in the program, completion of the registration process including non-refundable deposit of one month's tuition (\$370.00) will be required no later than May 15, 2019.

I agree that if my child is offered a placement in the program, and I accept it, I am responsible for an annual tuition charge of \$3700.00, payable in 10 monthly installments of \$370.00 each, **due on or before the first of each month (September through May).**

Signature of Parent/Guardian

Date

MONTGOMERY TOWNSHIP SCHOOL DISTRICT

CUBS CLUB STUDENT INFORMATION

Name:	Date of birth:
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SELF CARE SKILLS

TOILETING

All students must be toilet trained. How will your child communicate that they need to use the restroom?

STUDENT Demeanor

Describe your child. Please indicate "Y" for yes and "N" for No

Calm		Easily Frustrated		Active		Cooperative	
Quiet		Sensitive		Friendly		Argumentative	

Other:

COMMUNICATION SKILLS

What is the primary language spoken in your home?

What language does your child speak at home?

How does your child typically communicate?

Using 2-3 words Using 4-5 word phrases Using Complete Sentences

Is your child able to appropriately express their wants and needs?	YES	NO
Does your child appropriately ask for help when needed?	YES	NO
Does your child generally understand what is being said to them?	YES	NO
Can your child independently follow single step directions?	YES	NO
Can your child independently follow multiple step directions?	YES	NO

Other information regarding your child's communication you would like to share:

Has your child attended a preschool or daycare before? **YES NO**

If so, where?

Name and age of any siblings.

Please share any other information you feel is important for us to know about your child.