

Office Use Only

App Rec'd _____

App Fee: _____

Letter sent: _____

Entered: _____

1st day: _____

HOPMEADOW NURSERY SCHOOL

2024-2025 APPLICATION FOR ENROLLMENT

2 Day Threes T/Th 9-11:30 ____ 4s (M/W/F 9-11:30) ____ Pre-K M-F 9-12:00 ____
 3 Day Threes 9-11:30 W/Tu/Th__ 4 day 4s/Creative Explorers(Tu or Th 9-11:30 Pre-K Ext. Day M TU TH FR
 3s Ext Day 11:30-1 Tu____ 4s Ext. Day (11:30-1) M TU TH FR Pre-K 1st Steps in Music W 12-1:45__
 3s Ext. Day 11:30-1 Th____ 4s 1st Steps in Music W(11:30 -1) ____
 3s 1st Steps in Music 11:30 -1 W__

Child's Name _____ Nickname _____ DOB _____ M F

Address _____

City _____ State ____ Zip _____ Home Phone _____

Parent/Guardian _____ Cell Phone _____

Work Address _____ Work Phone _____

Parent/Guardian _____ Cell Phone _____

Work Address _____ Work Phone _____

Email Address (for school to home communication) _____

Siblings Name _____ DOB _____ HNS Alumni? Y N

Name _____ DOB _____ HNS Alumni? Y N

INFORMATION WHICH MAY BE HELPFUL TO THE TEACHING STAFF

Is your child also in daycare? _____

Has your child had other group experiences playing with other children? (for example, playgroups)

Has your child had experience with other adults, such as caregivers, sitters, etc.? _____

Have you recently moved? _____

Does your child know how to make his/her needs known? Are there special words for toileting, etc.?

Does your child have any physical conditions or special needs the teachers should be aware of? If yes, please explain.

Birth to Three Services: _____

Eyes _____ Ears _____

Speech _____ Allergies (food, insects, etc.) _____

Asthma _____ Other _____

What are your child's special interests/favorite things? _____

Are there any special needs, fears, or anxieties that your child might have that you are aware of?

What elementary school will your child attend? _____

The school's discipline policy has been explained to me: Yes No

Parent/Guardian Signature _____ Date _____

Your completed application, plus a non-refundable \$55.00 application fee payable to *Hopmeadow Nursery School*, may be mailed to: Hopmeadow Nursery School, PO Box 534, Simsbury, CT 06070.

For more information, please call 658-4990 or visit our website at www.hopmeadownurseryschool.org.

Hopmeadow Nursery School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admissions policies, scholarships and loan programs, and athletic and other school administered programs.