

APPLICATION FOR ADMISSION PRESCHOOL - KINDERGARTEN

This application can *only* be processed if all pages are completed. A photocopy of your child's birth certificate or passport *must* accompany this form.

STUDENT

Male Female

____ • ____ • ____
DATE OF BIRTH (YYYY.MM.DD)

LAST NAME FIRST NAME (& familial if different) MIDDLE NAME

CANADIAN CITIZEN LANDED IMMIGRANT (enclose copy of official document) Native Language _____

PRESCHOOL* 2 Day 3 Day KINDERGARTEN

*While we cannot guarantee placement, we do our utmost to honour your preference.

PARENT or GUARDIAN ONE

LAST NAME

FIRST NAME MIDDLE NAME NO MIDDLE NAME

ADDRESS

CITY PROVINCE POSTAL CODE

Home Phone _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

Cell / Pager _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

Email _____

Work Phone _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

EMPLOYER

POSITION

Child Lives With Both Parents Parent 1 Parent 2 Other _____

PARENT or GUARDIAN TWO

LAST NAME

FIRST NAME MIDDLE NAME NO MIDDLE NAME

ADDRESS

CITY PROVINCE POSTAL CODE

Home Phone _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

Cell / Pager _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

Email _____

Work Phone _____ (____) _____ - _____
COUNTRY AREA PHONE NUMBER

EMPLOYER

POSITION

SIBLING INFORMATION

Name _____ School _____ Age _____
 Male Female Also Applying? Yes No

Name _____ School _____ Age _____
 Male Female Also Applying? Yes No

Name _____ School _____ Age _____
 Male Female Also Applying? Yes No

EMERGENCY INFORMATION

Medical Service Plan (MSP) Number or Insurance Policy Details _____

Doctor's Name _____ Phone _____

Authorized Pick Up or Emergency Contact 1 _____ Phone _____

Authorized Pick Up or Emergency Contact 2 _____ Phone _____

Authorized Pick Up or Emergency Contact 3 _____ Phone _____

Do you authorize the Vancouver Waldorf School to take care of your child during an emergency if we are unable to contact you? This may include transportation to the hospital and basic first aid. Yes No

SIGNATURE PARENT or GUARDIAN ONE

SIGNATURE PARENT or GUARDIAN TWO

DATE SIGNED (YYYY.MM.DD)

DATE SIGNED (YYYY.MM.DD)

GENERAL INFORMATION

Please list any previous Day Care or Preschool attendance

Name of Facility Address Dates attended

Name of Facility Address Dates attended

Please briefly describe your child's special interests and abilities, strengths and weaknesses _____

What is your understanding of Waldorf Education? Please list any books read, lectures attended, research, etc.

What are your hopes and expectations for your child attending our school?

Do you have any further comments or concerns that would help us in our work with your child?

How did you hear about our school?

Confidential

PARENT/GUARDIAN QUESTIONNAIRE

1. At birth was your child Premature Very small Given special care

2. Does your child have any medical conditions? Please describe together with any treatments:

3. Does your child have any physical challenges? _____

4. What languages are ordinarily spoken in your home? _____

5. Does your child have any food or other allergies? Is the allergic reaction life threatening? Please elaborate and describe symptoms _____

6. Do you regularly eat meals together with your child? Which ones? _____

7. Briefly describe your child's diet: _____

8. Does your child have a regular bedtime during the school year? Yes No

What is the time range for going to bed? Earliest _____ Latest _____

9. Do you have a bedtime ritual with your child? If so, please describe:

10. Does your child watch television or videos? Yes No

If yes, how often? _____

11. Does your child use a computer? Yes No

If yes, how often? _____

12. Any special fears? _____

13. If the child's parents are separated, does the child have contact with both parents? If yes how much time is spent in each household? _____

14. If parents are separated, what is the custody agreement? Please attach written documents.

15. Please describe how your family spends time together _____

16. Is there anything you feel is pertinent to your child's application that has not been covered above?

Personal information will be used and disclosed in accordance with the privacy protection provisions of the Personal Information Protection Act (PIPA British Columbia). If you have any questions about the collection, use and disclosure of this information, consult the Vancouver Waldorf School Personal Information Privacy Policies in the Parent Handbook or contact the Vancouver Waldorf School Privacy Officer at privacyofficer@vws.ca