Little Panthers Preschool Application – School Year 2023-24

Child's Name: _								nder: F	M	[Race: _		
	Last			First		Middle	;						
Child's Birthdat	e:	_/	/	_ Age:		(Chi	ild needs to be	e 4 by Se	ptember	15 th)			
Child's Address	:						Parent Ph	none:					
Parents or Guard	dians:	Emai	l:										
Parents or Guard	dians:	1	Name			Address							
1													
2													
on a waiting list	for an	y slot					start the 23-24	4 school	year, I w	ould l	ike schoo	ol personn	el to put my child
Yes: No	o:	_											
Little Panthers	Presc	hool	–Que	estionn	aire								
On a scale between following areas?		and 5	(with	1 mear	ning po	or and 5 me	aning excelle	nt) ho	ow would	d you 1	rate your	child's de	evelopment in the
	Gets	Gets along well with other children:						Fo	ollows di	rection	ıs:		
	1 Help	2 os oth	ers:	3	4	5		1 To	2 oilet train		4	5	
	1	2	2	3	4	5		1	2	3	4	5	
As a parent or a physical needs?	guard	ian, w	ill yo	u fully s	support	an inclusive	preschool pro	gram wł	nere there	e are d	iverse pr	e-academi	ic, social, and
Yes		1	No										
Comments?													
Do you feel you	r child	is a g	good f	it for ar	inclusi	ve preschool	1?						
Yes		1	No										
Why or why not	?												
I understand tha	t all th	ings l	eing (equal, p	riority i	s given to ch	nildren turning	four ye	ars of ag	e by S	eptembei	: 15 th ?	
Yes		1	No										
Additional infor	mation	n/con	cerns?										