

Bright Prospects Cooperative Preschool Application

Rev 12/2011

Date _____ Applying for what school year? _____

Child's Name _____ Phone _____

Address _____ Birthdate _____

City/State/Zip _____ e-mail _____

Sex: _____ Female _____ Male

Parent(s) /Guardian(s) Name _____

Address (if different from above) _____

Name of Persons authorized to take child from school:

_____ Phone _____

_____ Phone _____

_____ Phone _____

Names of Persons **not** so authorized:

Status of Parents: _____ One parent _____ Two parents

_____ Other situation (describe) : _____

People in household - list parents, children, others:

Name

Age (for children)

Number of days per week child will attend school: _____

Preferred days (please rank in order of preference, indicating a 0 where you will not accept that schedule)

The consent of the teachers and the board is required to exceed the following guidelines:

2-3 days a week for children ages 33 months to 4 years of age

5 days a week for children turning age 5

_____ 2 days a week (T/Th)

_____ 3 days a week (M/W/F)

_____ 5 days a week (M/T/W/Th/F)

BPCP will work to meet your requested days but may need to make changes based on availability

Language other than English spoken in home _____

Is the child toilet trained? _____

Please give any information which might make your child's adjustment to school easier.

(Special interests, feelings about coming to school, reaction to new situations, etc.):

Parents' hobbies, interests, and skills you might be willing to share with the school:

Please include a \$50.00 application fee made payable to BPCP. This form may be mailed to the school at the address below:

BPCP attn: Membership
2730 East 31st Street
Minneapolis, MN 55406

Bright Prospects Cooperative Preschool is a non-profit, non-discriminatory, state-licensed corporation and is staffed by certified personnel.