

Date: \_\_\_\_\_

Time: \_\_\_\_\_

**Pre-Application for Putnam County School District  
Voluntary Pre-K Program**

2019-2020

birth certificate \_\_\_\_\_  
proof of res. \_\_\_\_\_

***This is not an enrollment form .***

Child's name:		Child's date of birth:	
Parent/Guardian name:	Daytime telephone #:	Home telephone #:	
Mailing address:			
City:	State:	Zip:	

Does your child have any special needs? \_\_\_\_\_

**\*\*All children must be toilet trained. -- NO EXCEPTIONS**

Which school are you zoned for : \_\_\_\_\_

What school are you applying for : \_\_\_\_\_

Are you applying for half day or full day : \_\_\_\_\_

<p><b><u>Voluntary Pre-K Attendance Policy</u></b> Please Initial after reading</p> <p><b><u>Attendance requirements</u></b></p> <p>Verify and sign your child's attendance each month at the school. _____</p> <p>Pre-k Fees are \$180.00/month. These must be paid on time and every month. Delinquent accounts may bring dismissal from the Pre-K Program. _____</p> <p>_____ Your child must arrive on time to the classroom. If your child will be arriving after 8:30 a written note or doctors note is required upon arrival.</p> <p>_____ If your child is going to be late or absent, it is your job to let the teacher know. Children that miss more than 3 days a month may be dismissed from the program.</p> <p><b><i>I understand and agree to the terms of the Voluntary Pre-K attendance policy.</i></b></p> <p>_____ Parent Signature</p> <p>_____ Date</p>
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