

Child's Name			

St Michael School Attention: Preschool 64 E. Selby Blvd. Worthington, OH 43085 Telephone: 614-885-3149 option 8 prekdirector@stmichaelworthington.org

St. Michael Pre-Kindergarten Program Application
Please include or mail a \$100 application fee (non-refundable) with a check made out to St. Michael
Preschool.
Child's Name:Birthdate
DateCheck #
This application form and check for \$100 will begin the application process. You will be notified via email within two weeks of the status of your application
We register according to priority levels. Please check your level below: 1 Re-Registering 2 Sibling of a past or present St. Michael Student 3 Registered member of St. Michael Parish 4 Registered member of another Catholic Church 5 Community member
We will be offering limited spots for each class. To qualify for a PreKindergarten class, your child must be 4 by September 30 and fully toilet trained. We will follow the priority guidelines outlined below and on our website Class Registering for: (please write "1st choice, 2nd choice, 3rd choice, etc.") 5 Full Day Pre-Kindergarten: 7:45 to 3:00
5 Morning Pre-Kindergarten, M-F: 7:45 to 10:30
3 Full Day Pre-Kindergarten, M,W,F: 7:45 to 3:00
3 Morning Pre-Kindergarten M,W,F: 7:45 to 10:30
Warrior Wear Shirt Size: Youth XS Youth S Youth M Youth L
St. Michael Prekindergarten respects each individual's cultural background. Please mark the choice which best describes your child's race or ethnicity: White (Non-Hispanic) Black (Non-Hispanic) Hispanic Asian American Indian/Native American Alaskan Native Native Hawaiian Pacific Islander (other than Native Hawaiian) Multiracial

☐ Unknown/Not Specified



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Please also fill out a Bef	ore Care and Aftero	are form an	d refer to ou	Before Care and Aftercare guidelines	
Before Care and After C	are: (additional cha	<i>irge)</i> Before	e care: (availa	ble for 5, 3, or 2 full day and morning	
classes only) Before Car	e: 7:00-7:45				
After care: (available for					
After Care: until 5:30 p.	m				
•					
Registration Informa	ntion				
Parent/Guardian Info					
		Coll #		Work #	
				WOIN #	
Occupation:			alationchine		
		Relationship:City/State/Zip:			
Primary Address			_City/State/2	ρ	
Name:		Cell #		Work #	
Occupation:					
			 elationship:		
				p:	
			,, -	r ·	
Child(ren) reside with: E	Both Parents M	other	Father	Divorced	
, ,				ation that the St. Michael Preschool Program	staff
needs to know concerning yo	our child's pick-up policy	<i>/</i> .			
Student Information					
Child's Name	_child's nickname				
				actice	
Age			o o.		
		Birth:	Languag	e Spoken at home:	
Siblings enrolled at St. N					
<u> </u>	•			4	
Younger Siblings Please	nut name age:	0.			
1	·	3			
Military Affiliation:	. - ·	5			
I am active duty/reserve	as/retired in the Ma	ring Corns	Army Navy (Coast Guard	
Talli active duty/Teserve	-5/Tetired iii tile ivia	Time corps,	Ailly, Navy, V	Loast Guard.	
Do you have an interest in:					
1 becoming a member					
2 enrolling your child a	it St. Michael Kindergar	ten?			
Parish Information:					
Registered Parish Number of years registered a	at Ct. Michael /if applies		Catholi	c: Yes No (check one)	
To the best of my knowledge					
			Date		
Parent's Signature • Deadlines matter. Priority will only be honore • Within the prioritized structure, applications					

- The priority structure serves as a guideline. The Pastor and Principal have the final decision on all student admissions.
- $\bullet \ \ \text{St. Michael Prekindergarten will not deny admission on the basis of race, color or national origin.}$
- St. Michael School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.