



**Cape Girardeau Public Schools Preschool
Application for Enrollment
2012-2013 School Year**

(Please print)

Child's Name _____

Date of Birth _____ Age _____ M _____ F _____

Parent/Guardian Name _____

Address (no PO Box) _____

Phone _____

(Please list daytime and cell phone numbers)

E-mail Address _____

Attended previous preschools? Yes No

If yes, where? _____

Participated in Parents As Teachers? Yes No

If yes, was this with Cape Girardeau Public Schools? _____

The goal of the Cape Girardeau Public School's Preschool Program is to provide students of the Cape Girardeau Public School District with a quality preschool opportunity. For the 2012-2013 school year, Preschool will be offered at Blanchard, Jefferson and Clippard elementary schools. *(There is a chance that one of these will be changed. If that happens you will be notified of the change and given the opportunity to amend your building preference.)* The morning classes will meet from 8:00 AM until 11:15 AM and the afternoon classes will meet from 12:00 PM until 3:15 PM. The Preschool will follow the district calendar for attendance days. If there is an inclement weather day, the Preschool will not be open.

Students will need to have money placed in their meal accounts. The morning class will eat breakfast and the afternoon class will eat lunch. Parents may apply for free or reduced meals.

Please send your application to Cape Girardeau Public Schools, 301 N. Clark, Cape Girardeau, Missouri 63701. Enrollment information will be mailed out in June. Cape Girardeau Public Schools does not discriminate on the basis of race, color, national origin, sex, or handicap as defined in Section 504, PL 93-112.

Cape Girardeau Public Schools looks forward to partnering with you as your child begins their school experience. If you have any questions, please contact Deena Ring, Director of Special Services, at 335-1867.

Parent Signature: _____ Date: _____

Building Preference: _____ AM _____ PM _____

OFFICE USE ONLY: Date and Time Application Received _____ Person Receiving Application _____
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