



Application for Enrollment for Preschool or Kindergarten

A non-refundable application fee of \$50.00 must accompany this application.

Child's Name _____ Birthdate _____

Please circle all programs that you are considering for your child:

Main Campus: 2-day Preschool 3-day Preschool 5-day Preschool
3-day Kindergarten 5-day Kindergarten

Early Extended Care 12:00 p.m. – 3:00 p.m. Late Extended Care 3:00 p.m. – 6:00 p.m.

School year of expected entry _____ School District of Residence _____

Parent's Name _____ Parent's Name _____

Address _____ Address _____

City, State, Zip _____ City, State, Zip _____

Occupation _____ Occupation _____

Employer _____ Employer _____

Home Phone _____ Home Phone _____

Cell Phone _____ Cell Phone _____

Email Address _____ Email Address _____

Please list the names and ages of all other people living in the home: _____

Who is financially responsible for school expenses? _____

How did you learn about the Cincinnati Waldorf School? (If someone referred you to us, please tell us whom to thank.) _____

Has anyone in the home or associated with the child been convicted of a felony or charged with a crime involving children? If yes, please explain: _____

Please describe your child's personality: _____

Were there any complications or extraordinary events in the child's life from birth to present? Please explain: _____

What is the general health of your child? (Please include any allergies, chronic illnesses or prolonged medications) _____

Describe aspects of your home life that you consider to be unique: _____

What are you hoping to find in this education for your child? _____

Your signature below indicates that all of the information on this application is factual and complete. The signature also verifies that the signer is the applicant's legal guardian and is responsible for decisions involving the applicant's education.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Please mail this completed application
with your \$50.00 application fee payment to:
Cincinnati Waldorf School
6743 Chestnut Street, Cincinnati, OH 45227
Attn: Karen Crick
or email <mailto:kcrick@cinciwaldorf.org>