 **®**  **SMALL WORLD PRESCHOOL**

**2025-2026 Enrollment Inquiry/Waiting List Placement**

**If you are inquiring about the 2025-2026 school year, you must fill out this form and email it back to us as soon as possible. Should there be no availability, we will be placing your child on the Small World Preschool wait list.**

**Small World Preschool is a small school and only a limited number of spaces become available each year. The wait list is always open, and enrollment opportunities depend on available spaces in the school as well as your child’s birthdate and age. Should a space become available, and you are contacted (by email), we will require a tuition enrollment deposit equal to that of the respective monthly tuition fee upon receipt of our notification to you. The offered space will be held for 72 hours only. If you do not submit a deposit within that time, you will lose the opportunity to enroll your child and forfeit your standing. This deposit declares your commitment to enroll in our program and is only refundable per school policy compliance OR applied to the last month’s tuition of the school year.**

**We are asking that you fill out the following, along with information pertaining to your child, and return to the preschool at your earliest convenience. Thank you for considering Small World Preschool as a learning and nurturing place for your child.**

**CONTACT INFORMATION:**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_**

**Mother/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Father/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address; if different than above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Session Preferred: (please circle choice) Part-Time (7-1) Full-Time (7-4) Extended Day (7-5)**

**Please tell us how you heard about Small World Preschool. (Family referral, friend, the Internet, Other School, social media, etc.)**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Do you know any other families who attend or have attended Small World in the past??\_\_\_\_\_\_\_\_\_\_\_\_ If so, who and when??**

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**What are your main reasons for choosing Small World Preschool?**

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**INFORMATION REGARDING YOUR CHILD:**

1. **Please list all schools/ licensed childcare (home daycare) facilities and length of time that your child has attended/currently attends: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Please describe your child’s temperament using as many adjectives as possible (i.e., outgoing, energetic, shy, etc.):**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Has your child been evaluated for, or diagnosed with, any special needs (behavioral, sensorial, speech, or psychological)? If yes, please list and we ask for complete honesty. Note: This does NOT affect our enrollment decision process, but your failure to disclose may warrant disqualification/exclusion from school.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Please provide pertinent information regarding your child’s medical history (illnesses, allergies, (food and environmental) operations, traumas, mental or physical challenges, specific medical conditions, and the like. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Is your child FULLY\*\* potty trained? (For children 3 years of age and over) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note: Our definition of “FULLY” is being able to dress and undress themselves without any assistance, independently show the initiative to use the bathroom on their own, and clean & wipe themselves without any help.**

**The information gathered from these questions will be helpful to the preschool in our selection process. You are required to answer all the questions honestly. Failure to provide as such could result in a child’s removal from our waiting list.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature of Mother/Guardian Date**

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 **Signature of Father/Guardian Date**

**Office Use/ Received by/Date: B.Ozaki /Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**waitlist.doc.09/2024**