



CHRIST CHURCH EPISCOPAL PRESCHOOL 2017-2018 EARLY APPLICATION FORM

Christ Church Episcopal Preschool; 5000 Pouncey Tract Road; Glen Allen, VA 23059; www.christchurchpreschool.com; 804.364.5905

Thank you for your interest in Christ Church Episcopal Preschool (CCEP). Please complete this Early Application Form and return it along with the \$100.00 application fee (payable to Christ Church Episcopal Preschool) to the preschool office. The application fee is non-refundable, except when space is not available prior to enrollment. Placement in our program is not guaranteed. Placement in CCEP is first open to current CCEP families and then to all Christ Church Episcopal church members. Current family and church member placement is anticipated to take place by January 11, 2017. Early Application Forms are currently being accepted from those other families interested in CCEP as well. Please be aware that 2017-18 tuition will not be set until November 2016. The preschool will confirm receipt of your Early Application Form and application fee by e-mail. With the exception of the 2-Day Twos class, all preschool students must be potty-trained to attend. Please note that CCEP does not administer medication in non-emergency situations. By signing below, you certify that all information on this form has been presented completely and accurately; false, incomplete, omitted or misleading information provided on this form or during the application process may jeopardize enrollment.

Student's Name: _____ Gender: Male / Female

Student's Birth Date: _____ Age as of 9/30/17: ___Years ___ Months

Sibling Applying? Yes/No If yes, name of sibling _____

Parent/Guardian #1:

Print Name: _____
Signature: _____
Relationship to Student: _____
Address: _____
City/State/Postal Code: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____
E-mail: _____

Parent/Guardian #2:

Print Name: _____
Signature: _____
Relationship to Student: _____
Address: _____
City/State/Postal Code: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____
E-mail: _____

CCEP strives to meet the needs of all students enrolled as best it can. Does your child have any physical, emotional, or educational needs or issues that might affect his or her education and/or care? Yes / No. If yes, please explain on back of this sheet.

Do you intend to apply for need-based scholarship opportunities? Yes / No. If so, please explain on the back of this sheet. Note that CCEP need-based scholarship awards require an application process, including proof of income.

Church Affiliation/Place of Worship (if multiple, list all): _____

CCEP typically follows the Henrico County Public School Calendar, and classes typically meet 9:00 a.m. - 12:00 p.m. **Please prioritize student's class interest by marking preference (1st, 2nd, 3rd choice).** Preferred class placement is not guaranteed. Class placement is based on availability, and is ultimately made at CCEP's sole discretion.

____ 2-Day Twos	@\$2,010.00 Tuition/Year	Meets TW or ThF	(Age 2 by 12/31/17)
____ 3-Day Threes	@\$2,520.00 Tuition/Year	Meets TWTh	(Age 3 by 12/31/17)
____ 4-Day Fours	@\$3,060.00 Tuition/Year	Meets MTWTh	(Age 4 by 12/31/17)
____ 4 Day PreK	@\$3,060.00 Tuition/Year	Meets MTWTh	(Age 4 by 9/30/17)
____ 5-Day PreK	@\$3,600.00 Tuition/Year	Meets M – F	(Age 4 by 9/30/17)

CCEP admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or 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, admission policies, scholarship and loan programs, and athletic and other school administered programs.