



Admissions Application

Pre-Kindergarten (4 Year Olds) Program

Applying for: Half-day (8:15 a.m. to 12:15 p.m.) **OR** Full-day (8:15 a.m. to 2:45 p.m.)

After-school care is available from 2:45 p.m. to 6:00 p.m. for an additional cost.

Student Applicant Information

Name _____ Prefers: _____
Last First Middle

Home Address _____
Street City State Zip

Date of Birth: _____ Gender: M F Student's Religion: _____
MM/DD/YYYY Parish:

Student's Race: Caucasian Asian African American Latino/Hispanic Native American
 Other (specify): _____

Parents' Information

Parent's Marital Status: Married Separated Divorced Widowed Single

Mother/Step-Mother/Guardian (circle one)

Name _____ Prefers: _____
Last First Middle

Home Address (if different from child's) _____
Street City State Zip

Home Phone: _____ Work Phone: _____ Cell: _____

Employer: _____ Address: _____

Email address: _____

Father/Step-Father/Guardian (circle one)

Name _____ Prefers: _____
Last First Middle

Home Address (if different from child's) _____
Street City State Zip

Home Phone: _____ Work Phone: _____ Cell: _____

Employer: _____ Address: _____

Email address: _____

Does the applicant have siblings enrolled at Our Lady of Grace School? Yes No

Does the applicant currently attend a preschool or day care? Yes No If yes, where? _____

Preschool Director: _____ Phone: _____

Is the child potty-trained? Yes No

Is English the primary language spoken at home? Yes No If no, what is? _____

Has the applicant ever received auxiliary services such as outside tutoring, psychological or educational testing, speech/language therapy or professional counseling? Yes No If yes, please explain: _____

Has the applicant been hospitalized for significant medical treatment? Yes No If yes, please explain: _____

Is the applicant presently receiving physician prescribed medication? Yes No If yes, please explain: _____

Please list any other health or learning considerations for this child: _____

Please list any food allergies that you child has: _____

A non-fundable application fee must accompany the completed application. Payment may be made by check, cash, or submitted online at www.olgsch.org. Please note that court documents are required for all legal custody cases. Please mail or bring this completed form back to: OLG School, 201 S. Chapman St. Greensboro, N.C. 27403.

For office use only:

Date: _____ Check # _____ Cash _____ Online _____ Amount Paid: _____ ABC Form: _____