WEST ORANGE HIGH SCHOOL

51 CONFORTI AVENUE ♦ WEST ORANGE, NJ ♦ 07052 ♦ 973-669-5301 ext. 20560

CAREER EDUCATION DEPARTMENT Mrs. Nancy Mullin

PRESCHOOL APPLICATION FORM

By State mandate, your child must be 3¹/₂ to be eligible for this program, toilet-trained, and a West Orange Township Resident.

Our preschool is in session on Tuesday and Thursdays (7:35AM-2:00PM). The program runs from October-December for Semester 1 and Mid-February-May for Semester 2. Please note that if you enroll your child in our program the expectation is that you will drop off your child at 7:35AM and pick up your child at 2:00PM. We do not offer an extended day option.

Date:	Date Application Received	(Office Use Only)
Child's Name	Date of Birth	
Nickname (if any)	Gender: M/F	
Name of Parent or Guardian	1	
Address		
Telephone No	Cell Phone No.(Mother)	
Cell Phone No. (Father)	E-mail address	
Name and Relationship of C	Other Members of Household	
Previous Organized Group I	Play Experience of Child including Nursery/Day care	experience
Does your child suffer from	any allergies or food restrictions? If so, please includ	le the information below

including the specific allergies or food restrictions and if your child requires an epi-pen to be on site.

Revised April 2022

If your child is prohibited from participating in certain activities due to religious reasons please indicate which below:

In order that we might better understand your child's personality and thereby provide a better experience, please write a paragraph describing: the type of play most enjoyed, how your child relates to other children, and how new experiences are received.

PLEASE RETURN THIS FORM TO: West Orange High School 51 Conforti Ave. West Orange, NJ 07052

ATTN: Nancy Mullin