**CLOVERDALE COOPERATIVE PRESCHOOL**

 **APPLICATION FOR 2024 – 2025**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Gender\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Birthdate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age as of Sept 1st:\_\_\_\_\_\_yrs.\_\_\_\_\_\_mos.**

**Parent A’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent A’s Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent B’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent B’s Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email addresses: A\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_B\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other children in the family Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_\_\_**

 **(as of September 1st) Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_**

**Are you a former Cloverdale Parent? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_**

**Full Name of Alumni\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year enrolled \_\_\_\_\_\_\_\_\_\_\_\_\_**

**How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please specify days interested in enrolling your child in the morning program:**

**\_\_\_\_\_2 Days (Monday, Tuesday ~ 8:30-12:30)**

**\_\_\_\_\_2 Days (Thursday, Friday ~ 8:30-12:30)**

**\_\_\_\_\_3 Days (Monday, Tuesday, Wednesday ~ 8:30-12:30)**

**\_\_\_\_\_3 Days (Wednesday, Thursday, Friday ~ 8:30-12:30)**

**\_\_\_\_\_4 Days (Monday, Tuesday, Thursday, Friday ~ 8:30-12:30)**

**\_\_\_\_\_5 Days (Monday – Friday ~ 8:30-12:30)**

**Please specify days interested in enrolling your child in extended day:**

**\_\_\_\_\_2 Days (Monday, Tuesday ~ 8:30-3:30)**

**\_\_\_\_\_2 Days (Thursday, Friday ~ 8:30-3:30)**

**\_\_\_\_\_3 Days (Monday, Tuesday, Wednesday ~ 8:30-3:30)**

**\_\_\_\_\_3 Days (Wednesday, Thursday, Friday ~ 8:30-3:30)**

**\_\_\_\_\_4 Days (Monday, Tuesday, Thursday, Friday ~ 8:30-3:30)**

**\_\_\_\_\_5 Days (Monday – Friday ~ 8:30-3:30)**

**\*\_\_\_\_\_ I am interested in an 8:15 drop-off associated with the days above.**

**\*\_\_\_\_\_ I am interested in a 3:45 pick-up associated with the days above.**

**~THE APPLICATION FEE OF $50 MUST ACCOMPANY THIS APPLICATION**~

**Please return to:**

 **Laura Andersen/Business Administrator**

**Cloverdale Cooperative Preschool**

 **130 Pine Street, Florence, MA 01062**

**\_\_\_\_\_ Check here if you are interested in receiving the Richard Russell**

 **Scholarship Application.**

**Please complete below as well.**

**In what ways do you hope your child will benefit from attending Cloverdale?**

**Understanding that Cloverdale is administered as a parent cooperative, please specify any particular area that you wish to help with, or a hobby, skill, or occupation that would prove helpful with your cooperative obligations.**