



St. Joseph of Cupertino Preschool

Home of the Junior Jaguars

10120 N. De Anza Blvd. Cupertino, CA 95014

408-252-9778

408-725-1009 (fax)

www.sjcschool.org/preschool

PRESCHOOL APPLICATION 2012-2013 SCHOOL YEAR

Dear Parents,

This packet contains two (2) sheets which must be completed in order to apply to St. Joseph's Preschool. Please follow all instructions carefully and completely on the application form. Incomplete applications cannot be processed.

The children must be 3 years old by March 1, 2012 in order to apply for 2012-2013 Preschool year.

This packet contains:

- 1) Application form (white)
- 2) School Recommendation Form (green)
- 3) Two self-addressed envelopes

Instructions:

- 1) Please use envelopes provided.
- 2) Complete and fill out the application Form and return with:
 - a) A non-refundable \$75.00 application fee. Please do not send cash.
 - b) A copy of the child's Baptismal certificate. Do not send the original document.
- 3) Take the School Recommendation Form (green sheet) and the envelope to your child's teacher. If your child has not been to child care or preschool, you can skip this step. Please indicate "not applicable" on the application in the section Previous Preschool Attended.

The application forms/items are due on or before Monday, February 27, 2012. You will be mailed a letter with a specific time for a preschool assessment (date will be on March 5 or March 6, 2012). If more than one child is applying, you must complete an application form for each child.

Thank you for your interest in St. Joseph's School.

Sincerely,

Mary Lyons
Principal

Jean Wilson
Preschool Director



St. Joseph of Cupertino School

10120 N. De Anza Blvd., Cupertino, California 95014 • (408)252-6441 • www.sjcschool.org

Junior Jaguars Preschool Application

Instructions: Please complete all sections. Indicate "NA" if something does not apply. Please fill out one application per child. Each application must be accompanied by a \$75.00 non-refundable fee. ** Make checks payable to "St. Joseph of Cupertino School."

Session Preference: (Please choose one. See attached schedule for details.)

- AM Session Only** 7:30 am—11:30 am
 AM Session + Enrichment Activities 7:30 am—3:00 pm
 AM Session + Enrichment Activities + Extended Care 7:30 am—6:00 pm

STUDENT INFORMATION

Child's Name: _____ Male Female
Last First Middle Preferred Name for Nametag Use

Home Address: _____
Number and Street City State Zip Code

Home Phone: _____ **Birth Date:*** _____ **Place of Birth:** _____ **SS#** _____
* Child must be 3 yrs old by March 1

US Citizen? Yes No *(If no, please provide a copy of the student's visa)* Is this student on an F Visa? Yes No

Previous preschool attended: _____
School Name Address City, State, Zip Code Phone number

Is this child English-Language proficient? Yes No **Primary language spoken at home:** _____

Is this child potty-trained? Yes No At what age was potty-training completed? _____

Has this child been identified with any of the following special needs:

- Vision
 Speech
 Hearing
 Learning
 Other: _____

Does this child have any special medical needs or take daily medication? Yes No
If yes, please describe: _____

Child's Ethnic Background: *(Check all that apply)*

- | | | | | | |
|--|---|---|---------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Native American | <input type="checkbox"/> African American | <input type="checkbox"/> Hispanic | <input type="checkbox"/> Caucasian | <input type="checkbox"/> Filipino | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Korean | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Indian | <input type="checkbox"/> Pakistani | <input type="checkbox"/> Middle Eastern |
| <input type="checkbox"/> Indonesian | <input type="checkbox"/> Southeast Asian | <input type="checkbox"/> Pacific Islander | <input type="checkbox"/> Multi Racial | <input type="checkbox"/> Other: _____ | |

Child's Religion: _____ Has this child been baptized? Yes No
Please include a copy of baptismal certificate with your application.

Baptismal Date Church Name City State Zip Code

Child lives with: Both Parents Mother Father Other: _____
(Relationship)

Parental Status:* *(If child is not living with both parents)*

- Father: Separated Divorced Remarried
 Mother: Separated Divorced Remarried

**The \$75.00 application fee is waived for families who currently have children enrolled in SJC Elementary School.

St. Joseph of Cupertino School does not unlawfully discriminate on the basis of race, color, national or ethnic origin, age, sex, or disability in the admission of students, the administration of educational policies, scholarship and loan programs, and athletic and other school-administered programs.

FAMILY INFORMATION

FATHER

MOTHER

First and Last Name:		
Home Address: <i>(if different than that of child)</i>		
Home Phone: <i>(if different than that of child)</i>		
Cell Phone:		
Email Address:		
Occupation:		
Employer Name:		
Employer Address:		
Business Phone:		
Religion:		
Attends Mass Regularly:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
US Citizen:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
SJC Alumni:	<input type="checkbox"/> Yes Year Graduated: _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes Year Graduated: _____ <input type="checkbox"/> No

Sibling Information: *(Please list all other children in the family)*

Name	Age	Grade	Present School

PARISH INFORMATION

Is your family registered at St. Joseph of Cupertino Church? Yes No

If Yes, Parish Envelope Number: _____

If No, are you registered at another parish? _____

TUITION INFORMATION

Please initial:

____ I am familiar with St. Joseph's tuition payment options. ____ I will be responsible for keeping these payments current.

Do you have any outstanding tuition balances at any other school your child has attended? Yes No

If yes, at which school and when do you plan to finalize payment on this balance? _____

STATEMENT OF INTENT

On the reverse side of this sheet of paper, please indicate why you wish to enroll your child at St. Joseph of Cupertino Preschool. **Application will not be processed without this statement.**

Signature

Date



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SCHOOL RECOMMENDATION FORM

Dear Teacher or Child Care Provider,

_____ has applied for admission to Preschool at St. Joseph of Cupertino School. In order to properly place him/her we would greatly appreciate your assistance. All replies are confidential. Check the boxes which most closely reflect your opinions. Please return this evaluation in the enclosed self-addressed envelope to St. Joseph of Cupertino Preschool as soon as possible.

Social/Emotional Development

Shows ability to adjust to new situations	Yes	No	Has Trouble
Recognizes own feelings and manages them appropriately	Yes	No	Has Trouble
Demonstrates independence and self-help skills	Yes	No	Has Trouble
Respects and cares for classroom environment and materials	Yes	No	Has Trouble
Follows classroom rules	Yes	No	Has Trouble
Plays well with other children	Yes	No	Has Trouble

Physical Development

Demonstrates basic loco motor skills	Yes	No	Has Trouble
Uses tools for writing and drawing	Yes	No	Has Trouble

Cognitive Development

Observes objects and events with curiosity	Yes	No	Has Trouble
Shows persistence in approaching tasks	Yes	No	Has Trouble
Explores cause and effect	Yes	No	Has Trouble
Makes believe with objects	Yes	No	Has Trouble

Language Development

Expresses self using words and expanded sentences	Yes	No	Has Trouble
Understands and follows oral directions	Yes	No	Has Trouble
Answers questions	Yes	No	Has Trouble
Asks questions	Yes	No	Has Trouble
Actively participates in conversations	Yes	No	Has Trouble

Parental Support

Parents evidence concern for child's progress	Yes	No
Parents support the teachers in discipline of the child	Yes	No

The child attends our preschool/child care center _____ days a week for _____ hours per week.

If you have additional comments, please feel free to use the back of this form. Please send this form directly to St. Joseph of Cupertino Preschool in the envelope provided. Do not give it back to the parent.

Signature and Position

School