Pre-Enrollment Form



Child's Name:	
Birthdate://	
Name of person submitting form:	
How are you related to the student? (i.e. mother, guardian,	grandfather)
Email Address:	Phone number:
Mother's First & Last Name:	
Mother's Email:	Mother's Cell:
Father's First & Last Name:	
Father's Email:	Father's Cell:
Additional Information – Please circle the	Yes / No questions
What is the name of the child's current or previous school?_	
Has the child been expelled from another center? Yes / No	
What is the primary language spoken in your home?	
Has the child ever been recommended for, tested for, or qua Yes /No	alified for Special Education Services?
Does the child have an IEP (Individualized Education Progra	am)? Yes / No
Is the child notty trained? (Circle One): Haven't Started Ju	ust Starting Almost There Mastered Itl

Please note that	Mesa Grande Childrei	n's Center <u>Does N</u>	<u>ot <i>Offer</i> S</u> pe	cial Education	on services.
Who has Legal Cu	ustody of child (Circle On	e): Both Parents	Mother	Father	Other
If other, please ex	plain:				
Who will be respo	nsible for tuition payme	nts? (Check One): M	other Father	County Assi	stance Other
Please tell us how	you heard about Mesa	Grande Children's	Center? (Circ	cle One):	
Internet Search	Referred by Someone	e Church E	Bulletin (Other:	
contact you. Please non-refundable and	ompleted form to Mesa G note, there is a registra d is due upon enrollmer sired (Check Mark):H	ation fee of \$250 (pent and annually on A	er child). The August 12th.	registration full Days: *6:3	ee is
MON	TUE W	/ED	THU	_	FRI
What date would y	you like enrollment to be	egin?			
We will do everyth Enrollment is base	ning possible to meet yo d upon availability.	our needs, but we a	re unable to (guarantee sta	art dates.
Pa	ırent/Guardian's Signatı	ure		Date	e