ST. JOSEPH PRESCHOOL

ST. JOSEPH SCHOOL - TWO YEAR OLD PROGRAM FORM

This form may be filled out 2 ways before returning to school office:

1. **Click on the fields, type in information, and print.**
2. **Print out form, and write information *legibly*.**

STUDENT INFORMATION (please type or print and use child's full name):

Student's Name: _____
Last, First, Middle Initial Nickname, if any

Student's Address: _____

Phone Number: _____ Date of Birth: _____

PROGRAM SELECTION (select morning or afternoon and number of days):

Two Year Old Program – Morning Program (9:00 – 11:00 a.m.)

☐ Two Days (Tue/Thu) – *child must be two years old by September 1 of beginning of school year*

☐ Three Days (Mon/Wed/Fri) – *child must be two and ½ years old by September 1 of beginning of school year*