



APPLICATION FOR ADMISSION

Child's Information:

Last Name _____ **First Name** _____

Name Child is Usually Called _____

Date of Birth _____ **Sex** _____

To whom should correspondence be sent? Please print name(s) clearly.

Has your child had previous group experience?

Parent Information:

Parent's Full Name _____ **Occupation** _____

Home Address _____

Zip Code _____ **Home Phone** _____

Business Address _____

Business Phone _____ **Email Address** _____

Hobbies and special interests _____

Parent's Full Name _____ **Occupation** _____

Home Address _____

Zip Code _____ **Home Phone** _____

Business Address _____

Business Phone _____ **Email Address** _____

Hobbies and special interests _____

With whom does the child live? _____

Siblings:

Name _____ **Age** _____ **School** _____

Name _____ **Age** _____ **School** _____

Name _____ **Age** _____ **School** _____

Caregiver's Name _____ Phone _____

Emergency Information:

If you are unavailable in an emergency, whom should we call?

Phone of Emergency Contact _____

Address of Emergency Contact _____

Pediatrician's Name _____

Phone Number: _____

Any special problems? (e.g. asthma, diabetes, seizures, allergies)

Is there information you would like us to have about your child's birth or early development?

How did you hear about Columbus Park West Nursery School?

What did you hear about Columbus Park West Nursery School that interested you in applying?

Are you interested in applying for Financial Aid? _____

Parent's Signature _____ **Date** _____

Parent's Signature _____ **Date** _____

**Please return this form and clerical committee contact sheet with the application fee of \$45.00 payable to:
Columbus Park West Nursery School
100 West 94th Street
New York, NY 10025**

Columbus Park West Nursery School admits students of any race, color, religion, sex, national and ethnic origin. It does not discriminate in administration of its educational policies, admissions or scholarships.



Clerical Committee Contact Sheet

Child's Name _____

To whom should correspondence be sent? _____

Parent's Name _____

Home Address _____

Home Phone _____ Work Phone _____

Cell Phone _____

Email Address _____

Parent's Name _____

Home Address _____

Home Phone _____ Work Phone _____

Cell Phone _____

Email Address _____

This form will be used by the Clerical Committee to keep you informed about events for applicant families as you complete the admissions process. Please be sure to give us the most current information you have available.