



# Learning Ladder Preschool Registration 2020-2021

## Program Description:

The Learning Ladder Preschool is housed in Our Lady of Victory Catholic School. We currently have 3 classrooms licensed through the State of MN that serve children 3-5 years old in half and full day programs. Students develop social skills along with academic skills as they explore and play. Large motor skills are practiced in our school gym as well as on our outside playground. Students are able to participate in our MN State sponsored food program for both breakfast and lunch. Before and after school child care is available from 7:30am until 5pm for enrolled students. Preschool classes are limited to ten students per session to ensure quality education, ample classroom space and individual attention. Students must be the age of the class (3, 4 or 5) and toilet trained by September 1<sup>st</sup> to enroll. **NO EXCEPTIONS.**

## Registration Process:

Families interested in enrolling in Learning Ladder Preschool should follow the 2-step process below to ensure a spot for their child.

1. Interested families should submit a registration form along with the \$75 nonrefundable registration fee. An email will be sent out confirming the receipt of the application and confirming the age group and days of the week. We do our best to honor day of the week requests but due to classroom limits, second choices are used at times.
2. During the summer, classes are formed based on family interest and staff availability. At the beginning of August, families will receive a class assignment letter. **In order to secure your child’s spot, September tuition will be due by August 15. Any spots not confirmed with payment of September tuition will be opened up to those on the waiting list.**

**Health Care Immunization Records are required by the state for children to enter our program.** Children may not begin preschool without this paperwork turned in to the school office. Please make any doctor visits early in the summer. It may take a few weeks to get the immunization forms back from their doctor.

The Learning Ladder Preschool calendar coincides with Our Lady of Victory School calendar and in large part ISD #544 Fergus Falls Public School. Some exceptions might be conferences or in-service days. Watch for changes in our newsletters.

**I understand the Learning Ladder Preschool registration guidelines and agree to the terms.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Child’s Name



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Child's Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_

Nickname (only if preferred at school): \_\_\_\_\_ Member of OLV Parish: Yes \_\_\_ No \_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

1. Parent/Guardian: \_\_\_\_\_ Address: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Employer: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_ Use this email for confirmation of registration

Physical custody of child: \_\_\_ Yes \_\_\_ No

2. Parent/Guardian: \_\_\_\_\_ Address: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Employer: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_ Use this email for confirmation of registration

Physical custody of child: \_\_\_ Yes \_\_\_ No

**Note: The child must be the age of the class and toilet trained by September 1<sup>st</sup>.**

## **Please circle one in each row:**

<b>Age Group:</b>	<b>3 &amp; 4 YEAR-OLD CLASSES</b> This program emphasizes socialization and introduces structured academics.	<b>4 &amp; 5 YEAR-OLD CLASSES</b> This program focuses on Kindergarten readiness with social and emotional support.
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<b>Type of Day:</b>	<b>Full Day (\$210/month)</b> 2-Day Full Day Class: 8:30 – 3:05 p.m.	<b>Half Day (\$100/month)</b> 2-Day Morning Class: 8:30 – 11:00 a.m
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<b>Days of the Week</b>	<b>1<sup>st</sup> Choice:</b>	<b>M/W</b>	<b>T/TH</b>
	<b>2<sup>nd</sup> Choice:</b>	<b>M/W</b>	<b>T/TH</b>

**\*\*\*Add-on Friday (Full Day, additional \$110/month) Yes No**

### **Registration Fee (\$75)**

Date received: \_\_\_\_\_ Check Number: \_\_\_\_\_ Cash: \_\_\_\_\_ Date Conf. email sent: \_\_\_\_\_

***\*Due to state licensing requirements, all sections must be filled in completely and accurately.***

**Section 1: Medical Information\***

In case of medical emergency, the following **physician** may be called:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

In case of dental emergency, the following **dentist** may be called:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

List daycare provider and phone number : \_\_\_\_\_ Phone#: \_\_\_\_\_

Does your child have any known allergies, stresses, security needs or health problems? (Please describe):

Does your child have any food restrictions that need to be followed at school?

Does your child receive any special services (speech, OT, PT, Special Education)? If so, please explain.

**Section 2: Emergency Contact\***

List three adults, within 25 miles (other than custodial parents), authorized to pick up your child **and** may be called in an emergency if parents can't be reached (must include **address and phone number** due to our licensing requirement):

1. Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_

**Section 3: Helpful Information**

Immunization Forms are attached:  yes  no (I will provide them before school starts)

Has your child completed an Early Childhood Screening?  yes  no (I will contact 218-998-0544 ext. 9528 to schedule)

Family history: (information to help us understand your child’s behavior: ex: pregnancies, deaths, siblings)

How did you learn about the Learning Ladder Preschool?

Anticipated Kindergarten Enrollment – **please check one:**  OLV School  FF Public School  Undecided  Other

**Section 4: Tell us about your Child**

Please complete the following questions to give us a better understanding of your child.

Describe your child to us.

What are your hopes for your child’s preschool experience?

What challenges do you anticipate for your child in preschool?

What should we know about your child in order to be prepared on day 1 to help them succeed?

Why do you want your child to attend Learning Ladder Preschool?