

Whiteford Agricultural School District

Preschool Questionnaire for Incoming Kindergarteners

To ensure that the Whiteford Agricultural School District has the most complete information about children enrolling in kindergarten, please complete the following information about your child and return it to the elementary school office along with all other registration paperwork.

Child's First Name: _____ Last Name: _____

Child's Date of Birth:

Name of Preschool or Early Childhood Education Program your child previously attended:

Name of Child's Teacher: _____

What was your child's primary form of care in the last year? (Check all relevant choices.) If the child was primarily at home during the last year, please check No Prior Care.

Great Start Readiness Program (GSRP) (State funded program age 4 by Sept 1st)

Head Start (Federally funded program ages 3 & 4)

Early Childhood Special Education Classroom (School based preschool for students with special needs or an IEP)

Young Fives/Developmental Kindergarten (Plan is for child to attend regular Kindergarten next year)

Child Care-Home Based (Operated out of a private home)

- Private Child Care Center (Commercial business that may be independent or part of a chain)
- Registered Family/Relative Child Care (Family or relative care provider receiving state assistance to provide care)

_Tuition-Based Preschool (Full or half day of instruction and learning)

No Prior Care Program (Stay at home for care)

Kindergarten (Child has been retained for a second year of kindergarten)