



Preschool Program

Day Preference Request Form 2019-20

Child's Name _____ Child's Date of Birth _____

Please check the days and times you would like your child to attend the preschool.

4 YEAR OLDS: FULL Day 8:30-3:00

____ Five Full Days ____ Three Full Days (Mon-Wed-Fri)

3 YEAR OLDS: Full Day: 8:30-3:00 Half Day 8:30-11:15

Your child should be 3 by September 1.

____ Five Full Days ____ Two Full Days (Tue & Thu) ____ Two Half Days (Tue & Thu)

Before and After Preschool Care

____ I might like to use the before-school CAMP program 7:30 am - 8:30 am

____ I might like to use the after-school CAMP program 3:00 pm – 5:30 pm

Parent Signature _____ Date _____

Preferred Phone _____ Email _____

Address _____ Parishioner? ____yes ____no

Please note that we will do our best to place your child on the days you select, but we need to balance classes and numbers of students to best meet the needs of the children as well as comply with RI State licensing requirements.

N. B. Children MUST be toilet trained to attend St. Luke's Preschool.