

**WYCKOFF PUBLIC SCHOOLS
WYCKOFF, NJ 07481**

JANET E. RAZZE, Ed.D.
SUPERINTENDENT

RUTH RIVERA, Ed.D.
SPECIAL SERVICES DIRECTOR

2008-2009 INTEGRATED PRESCHOOL PROGRAM APPLICATION

Date of application: ____/____/20____

Student Name: _____
Last First M.I.

DOB: ____/____/____ (4 year olds must be 4 years of age, but less than 5, on or before 10/1/08 and must be fully toilet trained; 3 year olds must be 3 years of age, but less than 4, on or before 10/1/08 and toilet trained)

Parent/Guardian(s): _____

Home address: _____

Parent/Guardian home phone: (____) _____

Parent/Guardian work phone: (____) _____ mo./fa

Parent/Guardian work phone: (____) _____ mo./fa.

Previous preschool/day care experience:

Does your child have any speech/language or medical concerns? If yes, please describe:

- Applications are due by April 1, 2008.
- Screening will take place shortly after receipt of application
- Openings will be filled by a lottery if necessary
- Those accepted will be contacted by telephone and will receive a contract by mail thereafter
- Tuition for the 2008-09 school year is \$2,500.00

Please submit applications to:

**Ms. Debbie Kirsch, Principal
Sicomac School
356 Sicomac Avenue
Wyckoff, NJ 07481**