



St. Alphonsus School Inc.
343 Munroe Avenue
Winnipeg, MB R2K 1H2
Tel: (204) 667-6271
Fax: (204) 663-4187

Application Form for Kindergarten (September 20__)

Name of Student: _____ Birthdate: _____ Gender: _____

Has your child attended a daycare, preschool or nursery program? ___ Yes ___ No

During the application process, may we contact the program? ___ Yes ___ No

Name of program: _____ Phone #: _____

MOTHER

FATHER

Name: _____

Address: _____

Home Phone #: _____

Work Phone #: _____ Cell Phone #: _____

Email address: _____

Religion: _____

Family Parish: _____

Briefly describe your reasons for choosing St. Alphonsus School for your child:

This application is **not** a registration form. It will be kept on file and you will be contacted prior to the registration date.

Interview Date: _____ Time: _____ Family notified: _____
(Office use only)

Date Received: _____ (Office use only)

(Please see reverse side)

Kindergarten and Alternate Care Program Information

The kindergarten program operates on even school cycle days (full days every second day). St. Alphonsus School provides an Alternate Care Program for kindergarten students on the days when kindergarten is not in session. The program provides an opportunity for students to participate in activities that explore their interests and compliment the kindergarten curricula, as well as supporting families' need for quality child care. The program is taught by our kindergarten teacher utilizing the classroom and other spaces in the school. It runs on the same time schedule as the school, making it a convenient and consistent routine for parents and children. A Before and After School Program is also available for families that require child care beyond school hours.

Do you require information about this program?

_____ Yes

_____ No

If you answered no, please help us develop our program by checking below:

_____ We have other child care provided by a daycare

_____ We have a parent or family member who stays home

_____ Other: _____