



ABERDEEN HALL

PREPARATORY SCHOOL

APPLICATION FORM

Preschool Admission

Academy Way, Kelowna, BC V1V 3A4
 250.491.1270
 admissions@aberdeenhall.com

Children applying to Preschool must be at least 3 years old, by December 31 of the year they intend to commence.

Please complete one application form per student

Date of Application : _____
dd-mm-yyyy

STUDENT INFORMATION

Name: _____
First Name Middle Name Last Name

Address: _____

Phone: _____ Date of Birth: _____ Gender: Male Female
dd-mm-yyyy

Citizenship: Canadian Citizen Landed Immigrant Other Please specify _____

APPLYING FOR

School Year: _____
 Preschool/Daycare 5 days/wk 8:45am-3:45pm
 After School Care Required 3:45am-5:00pm

**Aberdeen Hall has a limited number of placements for 3 year olds in our Half-Day Program (8:45am-11:45am).*

Offers are subject to Readiness Visits and made by the Admissions Committee in partnership with parents.

Please consider my child for the Half-Day Program* Yes No

PARENT 1 **GUARDIAN 1** Same address and phone number as student

Title: Mr Mrs Miss Ms. Dr. Other Please specify _____

Name: _____
First Name Middle Name Last Name

Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Bus. Phone: _____ Bus. Fax: _____ Bus. Email: _____

Citizenship: Canadian Citizen Landed Immigrant Other Please specify _____



PARENT 2 **GUARDIAN 2** Same address and phone number as student

Title: Mr Mrs Miss Ms. Dr. Other Please specify _____

Name: _____
First Name *Middle Name* *Last Name*

Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Occupation: _____ Employer: _____

Bus. Phone: _____ Bus. Fax: _____ Bus. Email: _____

Citizenship: Canadian Citizen Landed Immigrant Other Please specify _____

PARENT AND FAMILY INFORMATION

Student resides with: Both Parents Mother Only Father Only Guardian

To whom should correspondence be sent? Both Parents Mother Only Father Only Guardian

Custody agreement or restraining order in place? Yes No If yes, please provide a copy of the documentation

SIBLING INFORMATION

Name: _____ Age: _____
First Name *Middle Name* *Last Name*

Current School: _____

Name: _____ Age: _____
First Name *Middle Name* *Last Name*

Current School: _____

Name: _____ Age: _____
First Name *Middle Name* *Last Name*

Current School: _____



MEDICAL INFORMATION AND LEARNING / BEHAVIOURAL BACKGROUND

Is your child currently enrolled in a Preschool/Daycare Program? If yes, please list the provider below.

_____ Dates Attended: _____

Is your child able to easily separate from parents/guardians? Please comment below.

Is your child potty trained? Yes No In Progress

Please list any on-going/long term medications your child is taking? (ex) medication for ADHD, inhalers etc.

Please list any special dietary concerns/allergies (ex) food, insect stings etc.

Please list any learning, physical, behavioural or emotional concerns?

Please list vision, hearing, or speech challenges/concerns?

Has your child ever been assessed for or received Learning Assistance? Yes No

If, yes, provide the date of the assessment: _____ Name of Physician conducting: _____

If, yes, please provide further information on type of assessment: (Including: Occupational Therapy, Physical Therapy, Speech Language Pathology etc.)

Any recent significant changes in your child's life? (ex) death, separation, move, new sibling etc.

Remarks from the family (i.e. is there anything you would like to add that has not been covered in the application?):



ADDITIONAL SCHOOL INFORMATION

Did you or your partner attend an independent school?

Yes No Which one? _____

Are you interested in participating in Aberdeen Hall's:

Fundraising Programs? Yes No Maybe Volunteering Programs? Yes No Maybe

Aberdeen Hall's Preschool Program is a feeder program into our Kindergarten/Grade School. Do you plan on registering your child(ren) for future studies at Aberdeen Hall?

Yes No Maybe

I/We consent to having Aberdeen Hall Preparatory School collect personal information that may include student identification, birth certificate, behavioural, academic, and health information. I/We further consent to the use and disclosure of information contained in this form and otherwise collected by Aberdeen Hall Preparatory School for the purpose of establishing, maintaining and terminating the student's or parent's relationship with Aberdeen Hall Preparatory School.

Parent / Guardian Signature: _____ Date: _____

PRESCHOOL APPLICATION CHECKLIST

- Application Form Completed
- Copy of student birth certificate and BC health card
- Copy of parent birth certificates and BC driver's licenses
- Legal Residency of Parents Form
- A recent photograph of the applicant
- \$200 non-refundable application fee payable via cheque, credit card, pre-authorized debit, or online at aberdeenhall.com/admissions/apply/

*If you have a business card,
please attach it here.*

Please note entry into our Early Learning Preschool Program is limited. Priority placing is given to current Aberdeen Hall families and those with siblings. Following visits/assessments days, offers will be made to new students, space dependent.