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 scandischool.com

Application For Enrollment At
 SSJC PRESCHOOL
 FOREST PRE K 4
 2023-2024

Program*	2 Days	3 Days	5 Days
Half Day 8:30-1pm	\$14,500 <input type="checkbox"/>	\$17,900 <input type="checkbox"/>	\$21,300 <input type="checkbox"/>
Full Day 8:30-4pm	\$17,900 <input type="checkbox"/>	\$21,500 <input type="checkbox"/>	\$25,900 <input type="checkbox"/>
Select Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
Forest PRE K 4 Program* Full Day 8:30-4pm	\$27,500 (5 Days <i>Only</i>) <input type="checkbox"/>		
Please include a non-refundable application fee of \$100 upon registration Upon starting please include a non-refundable \$500 material fee with your deposit One- time new student enrollment fee \$1,000 ALL MEALS INCLUDED *Must be of age by October 1st, 2023			

Program	2 Days	3 Days	5 Days
Extended Day** 4:00-6pm	\$2,750 <input type="checkbox"/>	\$2,950 <input type="checkbox"/>	\$3,050 <input type="checkbox"/>
Select Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday		
** Includes afternoon snack			

APPLICANT INFORMATION

Child's Full Name: _____

Date of Birth: _____

Preferred gender pronoun: _____

Does the child live with both parents? _____

If no, please give home address: _____

Does your child speak any foreign languages? If yes, which languages?

PARENT INFORMATION

Parent Name: _____

Home address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____ Cellphone: _____

Email: _____

Occupation: _____ Title: _____

Business address: _____

Business phone: _____

PARENT INFORMATION

Parent Name: _____

Do both parents live together? _____

If no, please provide home address: _____

Email: _____

Cellphone: _____

Occupation: _____ Title: _____

Business address: _____

Business phone: _____

ADDITIONAL FAMILY INFORMATION

Applicants Parents are now:

Married Separated Divorced Single Parent Partners

Please list any siblings in applicant's family (name and age):

Please list anyone else with permission to pick your child up from school:

DETAILED INFORMATION

How would you like to describe your child overall?

Please describe your child's daily routine: (wake time/nap/activities/bedtime):

Please describe your child's eating habits and diet: (What/when/how well):

Does your child have any food allergies or medical issues that we should be aware of?

Has your child attended school before? If yes what are the reasons for leaving?

What type of school does the world need right now?

Why are you interested in SSJC and the Reggio Emilia Approach for your child?

How did you hear about our program?

I/We hereby submit this Application to enroll my/our child in at SSJC for the 2023-2024 school year (the "School Year"), beginning August 31, 2023 and ending on June 5, 2024, for the above-selected program. I/We have enclosed a \$100.00 application fee together with this Application, which I/we acknowledge is nonrefundable. I/We acknowledge that by submitting this Application, SSJC shall consider my/our child for enrollment at SSJC for the School Year, but is not guaranteeing a spot for my/our child the School Year. If SSJC accepts this Application on behalf my/our child, then I/we shall submit a signed "Enrollment Agreement for the 2023-2024 School Year" (the "Agreement") together with a nonrefundable commitment deposit and materials fee of \$500, and a one-time new student enrollment fee of \$1,000 by the deadlines prescribed in the Agreement, in order to hold our my/child's spot at SSJC for the School Year. My/our signature(s) constitute acknowledgment, and agreement with, the above policies and practices.

Parent/guardian Signature: _____ Date: _____

Parent/guardian Signature: _____ Date: _____