



## Little Tiger 10-Week Preschool

Presented by the Preschool Child Classes at Plainfield North High School

### *About the preschool*

The Child Development's Little Tiger Preschool is designed for three to five year-old children. The purpose of the program is to aid in the preparation and transition into kindergarten by fostering self-esteem and self-expression through organized educational activities selected to meet the physical, social, emotional, and intellectual needs of preschool children.

### *Operation*

The preschool runs 10 weeks, February to May, three days a week, every Tuesday, Wednesday and Thursday. The drop off time is at **9:15am** and pick up is at **11:00am**. To hold a spot for your child, the established cost for the semester is \$90 (payable to PNHS). The fee includes snacks, arts and crafts materials, t-shirts, and teaching resources.

### *The Program*

The daily preschool schedule consists of learning centers based on the preschool teaching objectives, story time, large and small muscle activities, circle time, music, art, snack, and free play. Activities are chosen related to a certain weekly theme. Each class is planned and prepared by the high school student teachers and is discussed with the instructor ahead of time.

### *The Facilities*

The facilities include a large playroom equipped with a bathroom, adequate lighting, ventilation, and proper safety precautions. Toys and materials for a wide range of experiences are available. During warmer temperatures some activities are outside. Additional facilities of the high school may be utilized, as well.

### *Transportation*

The parents/guardians or caregivers provide transportation, and many times carpools are organized. Parents are asked to see their child to the door of the school or to a member of the staff upon arrival and departure. We ask that the drivers be prompt and that they notify us in the event of any emergency that may delay them or if someone else is picking up their child.

### *Policies and Procedures*

Medical forms (physical forms) must be on record with us and be up-to-date (within two years of preschool date) or new ones must be turned in. **Child must be toilet trained.** Children should dress in simple, casual, washable clothing for play and weather. Smocks are provided for painting and craft projects. Sneakers are preferred. Children may **not** bring candy, gum, or any toys to school, unless for a specific activity.

\*\*\*The children are asked to bring in a change of clothes to be kept at school in case of an accident. Please place these in a bag and be sure to mark with your child's name. These will be given back the last day of preschool.

LITTLE TIGER PRESCHOOL APPLICATION 2017-2018

Child's Name: \_\_\_\_\_  
(Last) (First) (Middle)

\*\*\*CHILD MUST BE TOILET TRAINED\*\*\*\*

Preferred Session (please circle): Morning 9:15 a.m. - 11:00 a.m.

Prefers to be called: \_\_\_\_\_ Age as of February 19<sup>th</sup> 2018: \_\_\_\_\_ years  
\_\_\_\_\_ months

\*Must be 3 years old by February 19<sup>th</sup>. Preschoolers will be admitted as space permits.

Sex: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Birth date: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(Town) (State) (Zip code)

Home Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's occupation: \_\_\_\_\_

Father's occupation: \_\_\_\_\_

Ethnic/Cultural/Religious background (optional): \_\_\_\_\_

Language(s) spoken at home: \_\_\_\_\_

The child lives with: Parents Mother Father Grandparent(s) Foster Parent(s) Other  
(Please circle appropriate names)

Please list names & ages of siblings: \_\_\_\_\_

Previous school experiences (nursery school, etc.) \_\_\_\_\_

Previous informal group experiences (Sunday school, play groups, etc.) \_\_\_\_\_

In case of an *emergency* contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Food allergy/general allergies: \_\_\_\_\_ Food dislikes: \_\_\_\_\_

Any foods that your child should not eat because of religious or cultural purposes \_\_\_\_\_

Any special health needs: \_\_\_\_\_

\*\*\*Medical/physical forms must be turned in by the first day of preschool or be on record and up-to-date.\*\*\*

1. Does your child have any fears or phobias? \_\_\_\_\_

2. Does your child have any special interests? \_\_\_\_\_

3. Physical Development

A. Did your child begin walking early \_\_\_\_\_ average \_\_\_\_\_ late \_\_\_\_\_

B. Did your child begin talking early \_\_\_\_\_ average \_\_\_\_\_ late \_\_\_\_\_

C. Does your child require any special attention physically, mentally or socially? If so, please explain. \_\_\_\_\_

4. Social Development

A. Does your child have playmates? Yes \_\_\_\_\_ No \_\_\_\_\_

B. Does your child enjoy playing alone? Yes \_\_\_\_\_ No \_\_\_\_\_

C. Does your child enjoy using any of the following materials:

Clay \_\_\_\_\_ Crayons \_\_\_\_\_ Scissors \_\_\_\_\_

Paints \_\_\_\_\_ Pencils \_\_\_\_\_ Paste/Glue \_\_\_\_\_

D. Does he/she watch television regularly? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what types of shows does he/she enjoy? \_\_\_\_\_

E. Does he/she enjoy books? Yes \_\_\_\_\_ No \_\_\_\_\_

F. Does he/she enjoy music? Yes \_\_\_\_\_ No \_\_\_\_\_

G. What type of relationship does he/she have with his/her siblings? Please explain. \_\_\_\_\_

H. Favorite toys, games, activities are \_\_\_\_\_

5. Cognitive Development

A. Does your child recognize basic colors? Yes \_\_\_\_\_ No \_\_\_\_\_

B. Does your child recognize his/her written name? Yes \_\_\_\_\_ No \_\_\_\_\_

C. Does your child recognize his/her personal belongings? Yes \_\_\_\_\_ No \_\_\_\_\_

6. Emotional Development

A. How does your child react to new situations?

\_\_\_\_\_ Negatively \_\_\_\_\_ Neutral \_\_\_\_\_ Positively

Describe typical reaction: \_\_\_\_\_

B. How does your child react to strangers?

\_\_\_\_\_ Negatively          \_\_\_\_\_ Neutral          \_\_\_\_\_ Positively

Describe typical reaction: \_\_\_\_\_

\_\_\_\_\_



**PLEASE WRITE A BRIEF PARAGRAPH DESCRIBING YOUR CHILD'S HOME LIFE & EARLY EXPERIENCES.  
THIS WILL GREATLY AID US IN UNDERSTANDING & PLANNING FOR YOUR CHILD.**

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Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Return to:**  
*Stephanie Gloede*  
*Plainfield North High School*  
*Family and Consumer Science Teacher*  
*Little Tiger Preschool Coordinator*  
*815-609-8506 Ext: 832726*  
*sgloede@psd202.org*

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**\$90.00 PAYMENT INFORMATION**

Payment Date Received: \_\_\_\_\_

Check Number: \_\_\_\_\_ OR Cash: \_\_\_\_\_