

# The Willows Nursery School

1149 Minnesota Avenue, San Jose, CA 95125 | Phone (408)352-5601 | thewillowsnurseryschool.org

## Application Form

### Child Information:

Full Name: \_\_\_\_\_

What name does your child use? \_\_\_\_\_

Birthdate: (MM/DD/YYYY) \_\_\_\_\_

Gender:  Female  Male

### Home Information:

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Ethnic Background: \_\_\_\_\_

### Parent(s)/Guardian(s) Information:

Full Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Full Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

### A Few Questions:

Names & Ages of siblings? \_\_\_\_\_

Language(s) spoken in home? \_\_\_\_\_

Previous group play experiences? \_\_\_\_\_

How did you hear about The Willows? \_\_\_\_\_

Reason for choosing The Willows Nursery School? \_\_\_\_\_

Which Class option do you prefer? (Please write 1<sup>st</sup> and 2<sup>nd</sup> choice) \_\_\_\_\_

**CLASS OPTIONS: M-W-F AM, T-TH AM, M-F AM, M-TH PM**

### Acceptance:

I understand that the Willows Nursery School will only accept this application form if I (a parent or legal guardian) sign and submit it with a \$30 non-refundable application fee, which is not applicable to tuition charges if my child is enrolled at The Willows Nursery School. I also understand that at least one of the parents or legal guardians of my child must attend a free tour of The Willows Nursery School before the Willows Nursery School will consider offering a placement in the school for my child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

For office use only:

RD:

TD:

SC: