

APPLICATION FOR ADMISSION



Date: _____

Class (circle one): 2's, 3's or 4's

Starting Date: _____

Child's Name: _____ Birthdate _____ Sex _____

Address: _____ Home Phone _____

_____ Nearest Intersection: _____

Mother's Name: _____ Business Phone: _____

E-Mail Address: _____

Father's Name: _____ Business Phone: _____

E-Mail Address: _____



Where did you hear about RCNS? Have you visited our website (rcns.net)? _____

Mother's current and/or past occupational experience: _____

Skills and interests that you might share with the school: _____

Please list any anticipated time commitments that would interfere with your participation in nursery school (please specify days and hours): _____

Have you worked with children before? (please describe): _____

Father's current and/or past occupational experience: _____

Skills and interests that you might share with the school: _____

Please list any anticipated time commitments that would interfere with your participation in nursery school (please specify days and hours): _____

Have you worked with children before? (please describe): _____



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Have other children in your family attended this nursery school? _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____



Are there any special health or other problems that the school should know about?: _____

How did you learn about Ramapo Community Nursery School?: _____



Do you have other children? _____

Name: _____ Age: _____

Name: _____ Age: _____



If you have younger children, would you be interested in a baby-sitting exchange with another co-op family during your hours of participation at school? _____

Please explain briefly why you want your child to attend a co-op: _____



What do you, as parents, expect to gain from a co-op?: _____

There is a **non-refundable**, \$25.00 application fee due with submission of this form. Please make your check payable to: **Rockland Cooperative Nursery School** and mail it in with this form to:

RCNS
C/O Vice President of Membership
8 Old Schoolhouse Road, New City, NY 10956.

If you have any questions about the school or this application, please call us at **845-354-1168** or visit our website at **www.rcns.net**.