



2018-2019
Humphrey Public Preschool
Registration Form
Student Information

Student Name:

Last: _____ First _____ Middle _____

Street Address: _____ City: _____ Zip: _____

Gender: _____ Birth date: _____

Resident of the district? Yes No

What age group is your child enrolling in? 3 years 4 years

Does your child have a verified disability? Yes No

Has your child attended a preschool before? Yes No

If yes, which preschool did they attend? _____

Is your child potty trained? Yes No

Are the parents 18 years or older?

Yes No

Are there any siblings in the household? Yes No

If yes, please list the siblings in the household and dates of birth.

Note: All students must be potty trained before the first day of preschool.

Parent Information

MOTHER:

Name: _____

Address: _____ City: _____

Home Phone: _____ Cell Phone: _____

Employer: _____

Address: _____ City: _____

Work Phone: _____

E-Mail Address: _____

FATHER:

Name: _____

Address: _____ City: _____

Home Phone: _____ Cell Phone: _____

Employer: _____

Address: _____ City: _____

Work Phone: _____

E-Mail Address: _____

Please deliver the application to Mr. King or Mr. Sjuts in the office, if neither are available, please deliver to Jen Nolan. Applications will be marked with the date and time as they are received. Mailed in forms will not be accepted. The deadline for the preschool registration form is 3:30 p.m. on Wednesday, April 4, 2018. Applications turned in after this date may not qualify.

If you have any questions, please contact:

Mr. Greg Sjuts, Superintendent
Mr. Brice King, PK-12 Principal

(402) 923-1230

Date: _____
Time: _____
Received by: _____