



An Arts Based School and Teacher Training Center

Enrollment Year: _____

APPLICATION FOR ADMISSION

YOUNG THREES

STUDENT INFORMATION

STUDENT NAME

FIRST

MIDDLE

LAST

HOME ADDRESS

HOME TELEPHONE

DATE OF BIRTH

GENDER

PROGRAM & WEEKLY SCHEDULE

PROGRAM

HALF DAY (FOR STUDENTS TURNING 3 BETWEEN SEPTEMBER 1, 2020 AND APRIL 30, 2021)

WEEKLY

SCHEDULE

HALF DAY: Thursday & Friday 9:00 - 11:45 a.m.

PARENT/GUARDIAN INFORMATION

ENROLLING PARENT/GUARDIAN

FIRST

M.I.

LAST

RELATIONSHIP TO STUDENT _____

ADDRESS (If different from student's) _____

HOME PHONE (If different from student's) _____

CELL PHONE _____

EMAIL _____

EMPLOYER _____

WORK PHONE _____

PARENT/GUARDIAN

FIRST

M.I.

LAST

RELATIONSHIP TO STUDENT _____

ADDRESS (If different from student's) _____

HOME PHONE (If different from student's) _____

CELL PHONE _____

EMAIL _____

EMPLOYER _____

WORK PHONE _____

Lucy School promotes diversity and does not discriminate in its admission policies. Lucy School reserves the right to cancel any class because of inadequate enrollment. Students must be potty trained.

STUDENT HISTORY Continue responses on back as needed or create a separate document

Describe your child's temperament/personality: _____

What are your child's greatest strengths? _____

What does your child find challenging? _____

Has your child had any educational testing, medical screenings or developmental evaluation? _____

If yes, please elaborate. _____

Check here if your child has received neuropsychological testing or has otherwise qualified for an IEP or 504 plan. Please attach to this application a copy of any additional paperwork you have.

What languages are spoken in your home? _____

Please provide any additional comments about your child that may be helpful. _____

Why have you chosen Lucy School for your child? _____

I (we) have read both sides of this document, agree with the terms, and wish to enroll our child in the program indicated above. All information provided herein is confidential and will only be disclosed to school personnel. No relevant information has been knowingly withheld or misrepresented.

Enrolling Parent/Guardian Signature

Parent/Guardian Signature

Print Name

Date

Print Name

Date

Questions? Call 301.293.1163 or email admissions@lucyschool.com
Return the completed and signed form with a \$50 application fee to the school or
mail to: Lucy School, Attention: Admissions,
PO Box 1111, Middletown, MD 21769

NOTE: Application Fee waived for families currently enrolled at Lucy School