

APPLICATION FOR PRE-KINDERGARTEN PROGRAM

Saskatchewan's Pre-Kindergarten programs admit children based on eligibility criteria. It is important to share as much information about your child's growth and development as possible. For the 2020-2021 school year, children born in 2016 or 2017 are eligible to apply for the Pre-K program at their local school. There are 16 spaces available in the Pre-K program.

Submitting this application does not guarantee your child's enrollment in the program. You will be contacted by the school and/or the school division regarding your child's application. Thank you for completing this **confidential** application form:

Child's Legal Name: Last Name First Name							
Name used, if not first name:	der: Male Female Unspecified						
Date of Birth:	Age:	Sask. Health Card Num	nber:				
MM DD YYYY Date of Birth Verification: □ Birth Certificate □ SK Health Card □ Baptismal Certificate □ Temporary/Permanent Resident Card							
Neighbouring School:							
Family Information							
Name:		Name:					
Relationship to Student:		Relationship to Student:					
Primary Phone:		Primary Phone:					
Secondary Phone:		Secondary Phone:					
Work Phone:		Work Phone					
Home Address: (Street, City, Province, Postal Code)		Home Address: (Street, City, Province, Postal Code)					
Mailing Address: (if different from above)		Mailing Address: (if different from above)					
Trialing Flaciness. (if different from above)		(3 2	<i>"</i>				
Email:		Email:					
Student Resides with: Two Parents Relative	☐ Mother ☐ Guardian	☐ Father ☐ S	Shared Custody				
Number of Siblings: Place in Family: (e.g. youngest, oldest)							
Sibling's Name:	Age/Gra	nde: Sc	hool:				
Last First							
Sibling's Name:	Age/Gra	nde Sc	hool:				
Last First	,,,,,,,	.de					
Sibling's Name:	Age/Gra	nde: Sc	hool:				
Last First							
Religion: ☐ Catholic Parish:			er:				
Self Declaration of Aboriginal Identity: ☐ State	tus/Treaty □ Me	etis 🗆 Non-Status 🗆	Inuit				
Band Name:							
Background Information for English Language	Learners: (fill in this	s section if country of birth is	other than Canada)				
Have you registered with Greater Saskatoon Ca	tholic Schools thr	ough the Newcomer Ro	egistration Centre? Yes No				
Language(s) Spoken in the Home:							
Do you require interpretive services?							
Has any other child(ren) in the family attended	Pre-Kindergarten	?	□ No				
Does your child attend or receive support from	:						
□ KidsFirst □	Aboriginal Head	Start	☐ Social Services				
•	Hearing Specialis		☐ Occupational Therapist				
, , , , ,		nt or Resource Centre					
☐ Early Childhood Psychologist ☐	Licensed Child Ca	re:					
□ Other Agencies or Programs (please list):							



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Family Doctor:		Phone Number:						
Does your child have any allergies? ☐ Yes ☐ No								
If yes, please list:								
Is your child's immunization up to date? ☐ Yes ☐ No	Has your child's vision been checked? ☐ Yes ☐ No							
☐ Yes ☐ No		Can your child use the bathroom independently? ☐ Yes ☐ No						
Emergency Contact Information								
Name:	N	Name:						
Relationship to Student:		Relationship to Student:						
Phone Number:		Phone Number:						
Medical Conditions that require Medical or Emergency Services:								
Are you concerned with your child's speech and/or language? ☐ Yes ☐ No								
If yes, please explain:								
I understand that a speech-language pathologist (SLP) from the Saskatchewan Heath Authority OR Greater Saskatoon Catholic Schools is a part of the Pre-Kindergarten program. I agree that my child's hearing may be screened, and his/her speech and/or language skills may be assessed by the SLP and any written reports will be kept in my child's file with the school division. This information may also be shared with school staff for the purposes of supporting my child's learning and development. Signature of Parent(s)/Guardian(s)								
Saskatchewan's Pre-Kindergarten Program Eligibility Crite	orio							
This application will be reviewed by a selection committee. Child		II be accepted into the Pre-Kinderg	arten p	rogram b	pased on the			
following criteria guidelines:			•					
Is your child experiencing speech or language difficulties? Comments:		Yes	No 🗆	Unknown □				
Is your child experiencing challenges with social, emotional development? Comments:								
Comments:	lopmei	nt?						
Does your child have little or no opportunity for contact with other lists a language other than English most commonly used in the homocomments:	ner chile							
Does your child have little or no opportunity for contact with other ls a language other than English most commonly used in the home comments: Are any of your child's family members absent from the home for	ner chile	dren?			_			
Does your child have little or no opportunity for contact with other ls a language other than English most commonly used in the homocomments:	ner child ne? or long	dren?		0				
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Does your child have little or no opportunity for contact with other is a language other than English most commonly used in the home comments: Are any of your child's family members absent from the home for of time? Has there been any impact in the family from a traumatic experi	ner child ne? or long	dren?						
Does your child have little or no opportunity for contact with other is a language other than English most commonly used in the home comments: Are any of your child's family members absent from the home for of time? Has there been any impact in the family from a traumatic experiencing financial need?	ner child ne? or long	dren?						
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Date

Revised: January 16, 2020

Signature of Parent/Guardian