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**Application for Admission**

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender \_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_

**Name of Parent(s) or Legal Guardian(s)**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Our **Morning Program** runs from 9am – noon, Monday – Friday.

We also offer several **Extended Day options** at additional cost:

Early Morning drop-off (8:30-9am) / Lunch Bunch (12 – 1pm) / Afternoon Program (12 – 3pm)

Extended Day options are available for any number of days each week, on a semester, mid-semester, or per diem basis. All of the extended day options have limited availability. (We encourage older children to enroll in lunch bunch to prepare for their transition to Kindergarten.)

**Please indicate your interest in our lunch or extended day program:**

I plan to sign up for Lunch Bunch (# of days/week): **\_\_\_\_\_\_­­** or Extended Days (# of days/week): **\_\_\_\_\_\_­­**

**Siblings / Alumni:**

Have any other members of your family attended Cambridge Nursery School? \_\_\_Yes / \_\_\_No

If so, please indicate their name, relationship, and dates of attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\* Limited financial aid is available.** Scholarships are awarded on the basis of need.

A confidential Scholarship Application is attached.

**Please check here to confirm whether you are applying for a scholarship.** \_\_\_Yes / \_\_\_No

**Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_**

*CNS is committed to welcoming a diverse community. CNS does not discriminate in its enrollment or hiring with regard to a person's race, ethnic and national origin, religion, marital status, age, sexual orientation, HIV status, political beliefs or disabilities.*

**\*\* Please return this application and a $50 non-refundable application fee to:**

***Admissions, Cambridge Nursery School, 6 Hillside Place, Cambridge, MA 02140***

(Check or money order should be made payable to **Cambridge Nursery School**.)

Admissions priority is given to current families, siblings of current families, and siblings of CNS alumni. Prospective parents are strongly encouraged to attend our fall Open House, schedule a school tour, speak with a current family, and meet with the Director. Please see our website at <www.cambridgenurseryschool.org> for detailed information about admissions at CNS.

**Other Information**

Briefly describe your child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Child’s previous group experience, if any:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary language(s) spoken at home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CNS strives for a diverse community. What are some ways that your family might enrich our community? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How did you learn about Cambridge Nursery School? (CNS family, newspaper, signs, fliers, open house, yellow pages, CNS fundraiser, other) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why are you interested in CNS? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Briefly describe any special skills and interests that you would bring to a parent cooperative preschool (e.g. carpentry, plumbing, fundraising, publicity, teaching, financial, legal, accounting): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Parent Participation at CNS**

Cambridge Nursery School depends on the active participation of all of its parents. Many families support the school in countless ways beyond the basic requirements of parent participation, as listed below. Before you apply, please review this list and consider how involved you wish to be in your child’s preschool program and whether you will be able to meet these basic requirements.

* Assist in the classroom as a Parent Helper, approximately one morning per month
* Perform an ongoing parent job
* Participate in fundraising activities
* Assist at two, 6-hour, Parent Work Days
* Attend Parent Meetings.
* Parents are welcome to join the Parent Board, or attend Parent Board meetings.

**Scholarship Application**

Name of child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of birth\_\_\_\_\_\_\_\_\_\_\_\_\_

Name(s) of parent(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Employment Information** | Parent #1 | Parent #2 |
| Employer |  |  |
| Position |  |  |
| **Income Information** | Parent #1 | Parent #2 |
| Annual salary |  |  |
| Investment/securities |  |  |
| Fellowships |  |  |
| Gifts/allowances |  |  |
| Rents/other income |  |  |
| **TOTAL INCOME** |  |  |

**Other assets**: Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Savings \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Insurance/annuities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Monthly Expense Information** | **Amount** |
| Rent |  |
| Mortgage payment/ Assessed value |  |
| Car loan payment |  |
| Medical expenses |  |
| Childcare expenses |  |
| School tuition |  |
| Other |  |
| **TOTAL MONTHLY EXPENSES** |  |

Parent(s) signature(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Scholarships will be granted on the basis of need. Scholarship funds are limited – we may not have the funds available to award everyone who applies. Additional information may be requested. All information is kept strictly confidential.**

**PLEASE ATTACH ANY ADDITIONAL INFORMATION, AS NECESSARY. MAIL TO CNS WITH A COPY OF YOUR MOST RECENT YEAR’S TAX RETURN**