



APPLICATION FOR PRE-KINDERGARTEN PROGRAM

2016 – 2017 School Year

Hague Elementary School - P.O. Box 210-HAGUE, S0K 1X0 // 306-225-2104



Pre-Kindergarten is for children who will be three or four years old by December 31, 2016

Application deadline: Thursday, May 19th, 2016

Child's Full Name: _____
first middle last

Name used, if not first name: _____ Gender: M F (circle one)

Birth Date: _____ Age: _____ Saskatchewan Health Number: _____
year month day

** Parents, we will need a photocopy of your child's birth certificate and health card.** Thank you.

Street Address (town) or Land Location (rural): _____

Mailing address, if Post Office box: _____

Email Address: _____ Home Telephone: _____

Father's Name (Guardian): _____ Cell Number: _____

Mother's Name (Guardian): _____ Cell Number: _____

Optional Ancestry Declaration: First Nations Métis Inuit Non-Aboriginal

Number of siblings: _____ Place in family: (e.g., youngest, oldest) _____

1. Tell us about your child:

My child is good at _____

My child has difficulty with _____

2. My child has delays with: (please check all that apply)

_____ **Communication** – following directions, speaking clearly, expressions using complete sentences

_____ **Social skills** – taking turns, playing with others, sharing

_____ **Motor skills** – big movements (e.g., running, jumping) and small movements (e.g., holding a crayon, doing up buttons)

3. My child is potty trained: Yes ___ No ___ In Process ___

4. a) My child has attended preschool before: Yes ___ No ___

b) My child has attended a Pre-Kindergarten Program before: Yes ___ No ___

5. Public Health recommended my child be seen by:

___ Speech and Language Pathologist

___ Child Psychologist

6. My child has been seen by:

	Date of First Visit	Frequency of Visits
___ Speech and Language Pathologist	_____	_____
___ Child Psychologist	_____	_____

7. Additional Comments: _____

For the purpose of selection into the Pre-Kindergarten Program at Hague Elementary School, I authorize the exchange of information between Prairie Spirit School Division and the following Saskatoon Health Region contacts:

___ Speech and Language Pathologist

___ Early Childhood Psychologist

___ Parent Mentoring Program

___ Public Health Nurse

___ Other _____

Signature of Parent/Guardian

Witness

Date

Forward completed forms to:

Ms. Janet Jackson, Principal, Hague Elementary School

Maximum Pre-Kindergarten enrolment at Hague Elementary School is 16 students.

You will be contacted by **Friday, May 27th, 2016** regarding your child's application.

Reminder, we will need a photocopy of your child's birth certificate and health card. Thank you!