



Thank you for choosing to apply to Pali Preschool for your child's educational foundation!

To apply your child to our program, simply fill out the attached Pali Preschool Student Application & Child's Developmental History and turn in a non-refundable application fee of \$50.00. Payments for the application fee can be made by cash or personal check. You may submit your application and fee by mail or in person at our Preschool Office.

Office hours are Mondays-Fridays from 8:30am-4:00pm (closed on certain holidays).

Applications will be accepted starting from September 1st of the year prior to your child's start date. All students entering the Preschool program must be fully potty trained by the start of the school year.

Those that submit their application by September 30th will be considered for the first round of applicants. Applications will be accepted after September 30th and until classes are filled.

Following receipt of the application & fee, we will reach out to you to schedule your child's individual assessment. The assessment is an opportunity to better acquaint ourselves with your child and his/her abilities. After reviewing your child's assessment and developmental history, you will be notified of his/her acceptance via email.

Pali Preschool seeks future students that are ready to begin either on the first day of school or at the time of availability. Tuition is an annual tuition and parents are given the opportunity to either pay in full or in monthly installments via their FACTS account.

If you have any questions about Pali Preschool, please feel free to contact us:

Phone: (808) 523-6495

Email: info@palipreschool.com

Thank you again for choosing Pali Preschool!



Pali Preschool Student Application

467 North Judd Street, Honolulu, HI, 96817
Phone (808) 523- 6495, Fax (808) 537 - 5780

A non-refundable application fee of \$50.00 must be submitted with application

Date of Application: _____

Desired School Year: _____

Applicant Information:

Student's Name _____ Nickname _____

Address _____

Number and Street

City

State

Zip

Contact Number _____ Child's Birthday _____ () Male () Female

Name of siblings who previously attended Pali Preschool: _____

Parent/Guardian Information:

Dr Mr. Mrs. Ms.

Dr Mr. Mrs. Ms.

Name

Name

Cell Phone Number

Cell Phone Number

Email Address

Email Address

Employer

Employer

Occupation

Work Phone

Occupation

Work Phone

Parents'/Guardians' Status: Married Single Divorced Other _____

Who has physical custody of the applicant? _____

Name(s)

Relationship

Current Preschool/Child Care Center/Provider: _____ Dates Attended: _____

How did you hear about Pali Preschool? _____

Why did you choose Pali Preschool for your child? _____

What do you see as your part in your child's education? _____

Has your child ever been tested by the DOE or other agencies? () Yes () No Date of testing: _____

What were the results? (Please provide us a copy of the results) _____

May we have permission to contact your child's current teacher/provider? () Yes () No

Parent/Guardian Signature & Date

Parent/Guardian Signature & Date

For Office Use Only

Visitation Date _____ **Application Fee** _____

Assessment Date _____



Child's Developmental History

The Information shared will assist the teachers in understanding and helping your child. All information will be kept strictly confidential.

Child's Name _____ Date of Birth _____

"Nickname" _____

HOME LIFE

1. Parent/Guardian First & Last Name _____

2. Parent/Guardian First & Last Name _____

Who does the child live with? _____

Any siblings? If yes, please list name(s) & ages

Has the family made any moves or major changes within the last three years?

What language(s) is spoken at home and to what extent? _____

SCHOOL LIFE

Has your child ever attended daycare, another preschool or been in a preschool setting? If so, please indicate which program and the reason for the change.

Describe your child's attitude towards learning.

We are a Christian Preschool. Do you have any objections to your child being exposed to spiritual development? _____

What are your plans for your child for Kindergarten?

PROFILE OF THE CHILD

What are your child's strengths? _____

What are your child's weaknesses? _____

Describe your child's general personality _____

Does your child usually nap? ()Yes ()No

Any problems or special needs connected with sleep? _____

Does your child have any certain habits? _____

List any definite fears/stressors _____

Does your child have any particular interests? _____

Bedtime: _____ Wake up time: _____

Is your child potty trained DURING THE DAY? () Yes () No

Is your child potty trained DURING THE NIGHT? () Yes () No

Any regression in potty training? () Yes () No

If so, what triggered it? _____

How independent is your child (i.e. dressing himself/herself, putting on footwear, feeding self with utensil, etc.)? _____

Is your child able to understand and follow one-two step directions? () Yes () No

Is your child able to separate from parent/caregiver with minimal disruption? () Yes () No

How is your child disciplined at home? How does your child respond?

What goals do you have for your child while in preschool? _____

Why would Pali Preschool be a good environment for your child? _____

Is there anything else about your child you would like to share with the faculty that would be helpful in helping to better know, understand and work with your child? (His/her personality, temperament, "unique" behaviors, etc.)