

Application for Enrollment
El Montecito Early School

1455 East Valley Road
Santa Barbara, Ca 93108
805-969-3566

Student's Information

Student's Name: _____ Date of Birth: _____

Gender: _____ Is your child potty trained? _____

Are you looking for placement for the 2009-2010 school year or beyond? _____

Please circle your program preference:

Monday, Wednesday, Friday: Half Day(8:45-12:45) or Full Day(8:45-2:45)

Tuesday and Thursday: Half Day(8:45-12:45) or Full Day(8:45-2:45)

Monday through Friday: Half Day(8:45-12:45) or Full Day(8:45-2:45)

What would you like your child to gain from their preschool experience? _____

Primary Family Information:

Home Address: _____

Mailing Address: _____

Home Phone Number: _____ Church Affiliation: _____

Father's Information:

Father's Name: _____ Cell Phone Number: _____

E-mail: _____ Work Phone Number: _____

Company Name: _____ Job Title: _____

Mother's Information:

Mother's Name: _____ Cell Phone Number: _____

E-mail: _____ Work Phone Number: _____

Company Name: _____ Job Title: _____

\$100 Non-Refundable Registration Fee due with Application
Please make checks payable to El Montecito Early School