

Westville
Community Nursery School, Inc.

3 Tour Avenue, New Haven, CT 06515
phone: 203-387-6660
website: www.wcnsplay2learn.org

FOR OFFICE USE

- Application Fee \$40 Paid
- Check number _____
- Date _____

APPLICATION FOR ENROLLMENT 2024-2025

Child's Name: _____ usually called _____

Home Address: _____

Date of Birth: ____/____/____ Phone(s): _____

Parent Name(s): _____

Occupation(s): _____

Email(s): _____

Previous school, playgroup experience: _____

How did you hear about WCNS?: _____
(If from a friend or neighbor, please include their name so that we may thank them appropriately)

Please indicate 1st and 2nd choice:

Part Day Program 8:00AM* - 1:00PM

Monday/Wednesday/Friday 1st _____ 2nd _____
Monday - Friday 1st _____ 2nd _____

School Days 8:00 AM* - 3:00 PM

Monday/Wednesday/Friday 1st _____ 2nd _____
Monday - Friday 1st _____ 2nd _____

Full Day Program 8:00AM* - 5:30PM

Monday/Wednesday/Friday 1st _____ 2nd _____
Monday - Friday 1st _____ 2nd _____

*Drop-off is between 8:00 and 8:30am

Are you interested in financial aide? Yes / No

Signed: _____ Date: _____

Please enclose a non-refundable \$40.00 processing fee.

Westville Community Nursery School, Inc. does not discriminate on the basis of race, creed, color, sexual orientation, gender identity or expression, family structure, ability or national or ethnic origin in the administration of admissions procedures or educational practices and policies.