

**El Jardín de Niños de la Universidad - University Garden Preschool at University
Preparation Charter School at CSU Channel Islands**

1099 Bedford Drive ♦ Camarillo, CA 93010

PRESCHOOL ENROLLMENT APPLICATION FOR 2019– 2020 SCHOOL YEAR

Instructions to Parents: (Please Print) **1. Please fill out one application per child. 2. Registration packets will be completed upon acceptance. 3. Must have a “daytime” phone number listed for contact.**

1. Pupil's Name: _____ Birthdate: _____

First Name

Last Name

(9-1-16) example)

Age of Child on Sept. 1, 2019 _____ Male/Female _____

Language your child speaks most fluently: _____ Second Language (if applicable) _____

Residential Address _____

Street

City

State

Zip

Mailing Address – If different from residence _____

Email Address _____

Parent's/Guardian's Name _____ Phone _____

First and Last Name

Home

Cell

Work _____ (circle one to call)

Sibling's applying for same school year: Name(s) _____ Grade(s) _____

One application is needed for each student applying

Sibling's currently enrolled/attending UPCS: Name(s) _____ Grade(s) _____

Please check if applicable:

☐ Current Student Sibling Priority Name(s): _____

☐ UPCS Employee

☐ Currently Attending El Jardin Preschool

☐ CSUCI Faculty

☐ Camarillo Resident

In signing this form I understand: (1) Approval is subject to availability of space. (2) Parent is responsible for pupil transportation. (3) If no space is available at this time, I will be placed on a waiting list through a random selection procedure and contacted when my name becomes available.

Parent's /Guardian's Signature

Date

For School Use Only

☐ Accepted Date _____

☐ Declined Date _____

☐ Date Received w/ Initials

☐ Lunch Application Attached
(MUST BE ATTACHED)

☐ Scholarship Requested

☐ Tuition (if scholarship not available)