



# KINDERGARTEN APPLICATION

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Personal Information & Parent Details

Please complete all sections. Books, class materials, day trips and other supplies are included in tuition.

## Student Information

Student's Last Name

Student's First Name

Mailing Address (Street)

City

Province

Postal Code

Birth Date (MM/DD/YYYY)

Gender

Female

Male

## Parent / Guardian #1

First Name

Last Name

Mailing Address (if different from above)

City

Postal Code

Telephone (Cell)

Telephone (Work)

Email

Occupation



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Parent #2 & Current Placement

## Parent / Guardian #2

First Name

Last Name

Mailing Address (if different from above)

City

Postal Code

Telephone (Cell)

Telephone (Work)

Email

Occupation

## Current Placement

Applying for (JK / SK)

Current Daycare or School (if any)

Address of Current Daycare or School

Email of Current Daycare or School

How Long Attending?

Full or Half Days?

Typical Group Size

## Interests

Books & Stories

Art & Crafts

Music & Singing

Pretend Play

Outdoor Play

Blocks & Building

Puzzles & Games

Numbers & Counting

Other:



This helps us get to know your child and prepare for their first day.  
Please tick what is currently true — we expect many of these to still be developing.

## Self-Care at Home

A few practical things that help us prepare for your child's day.

- Fully toilet trained (daytime)
- Washes hands independently (with reminders is fine)
- Drinks from an open cup
- Toilet training in progress / occasional accidents
- Eats independently with utensils
- Still naps during the day

## Communication

- Speaks in full sentences
- Can follow two-step instructions
- Recognises some numbers / letters
- Easily understood by adults outside the family
- Can name colours and shapes

Language(s) spoken at home:

## Social Skills

These vary by day and setting. Please tick what's most typical for your child.

	Often	Sometimes	Not yet
Separates from parent without distress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plays alongside other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plays cooperatively with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can wait and take turns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can sit and listen to a story	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Anything else about how your child communicates or plays:



# IN CASE OF AN EMERGENCY

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Contacts, Pickup & Consent

## Emergency Contact

A person to contact if a parent or guardian cannot be reached.

Full Name

Relationship to Child

Phone Number

## Authorized for Pickup

Adults (other than parents/guardians) authorized to pick up your child from school. Photo ID will be requested.

Name

Relationship & Phone

Name

Relationship & Phone

Name

Relationship & Phone

## Emergency Medical Consent

In the event of a medical emergency where a parent or guardian cannot be reached, I authorize Howlett Academy to seek emergency medical care for my child, including transport to a hospital if necessary. I confirm that the information provided on this form is accurate to the best of my knowledge, and I will notify the school promptly if any of it changes.

Parent / Guardian Signature

Date



Please update your child's immunization record and provide a copy to the school.

## Child Details

Child's Full Name

Date of Birth (MM/DD/YYYY)

Child's Physician

OHIP #

Version Code

Physician's Phone

## Health Information

Has your child had a recent surgery or illness?

Yes

No

If yes, please explain:

Has your child recently broken any bones?

Yes

No

If yes, please explain:

Has your child been required to take any medications?

Yes

No

If yes, please list and include dosage:

Does your child have any allergies, dietary restrictions, or food sensitivities?

Yes

No

If yes, please list each one and describe severity, symptoms, and any emergency response (e.g. EpiPen):

## Additional Information

Please provide any additional information about your child's behaviour, or physical, emotional or mental health.