



Shine On Kids

Application

Please fill out the application and return it to the office with a \$50.00 non-refundable application fee.

Interview

Once we have received your application, you will be contacted for an interview. Interviews are conducted between the teacher, parents, and child.

Enrollment

Upon acceptance by the teacher, an enrollment and contracting interview will be scheduled with a teacher.

For Office Use Only

Name of Parents _____

Name of Child _____

Date Fee Received _____ check # _____ By _____

Date application copy sent to teacher _____





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Date: _____

Child

Full Name of Child _____

Gender _____ Birth Date _____

Parents

Mother's Name _____ Home Phone _____

Full Address _____ Email address _____

Occupation _____ Work Phone _____

Father's Name _____ Home Phone _____

Full Address _____ Email address _____

Occupation _____ Work Phone _____

If your child does not live with both parents, please describe the child's living situation:

How long have you lived in this area? _____

Other children in the family

Please list names, ages, and current grade if applicable: _____

What are your child's interests, tendencies, and characteristics?

What are your child's gifts? Which qualities would you like to see enhanced? _____





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What are you hoping to find in this program for your child? _____

Health Profile

Events in children's earliest years can have both subtle and profound effects on their later life. While some of the following questions may not seem to apply to your child's current situation, they are designed to bring parents and teachers together in forming the broadest possible picture of your child's development. _____

Early History (Birth to age 5)

How was the pregnancy and birth? Any special conditions or health concerns for mother or baby?

When did child first start walking? Talking? _____

Any problems during early childhood with eyes, ears, speech, co-ordination, skin, digestion? Please be specific. _____

Any early childhood trauma or serious illness? _____

Health History

Please indicate the illnesses child has had and at what age:

Diphtheria _____ German Measles _____ Chicken Pox _____

Mumps _____ Whooping Cough _____ Scarlet Fever _____

Measles _____ Ear Infections _____

Other _____





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Health History (continued)

Has your child had any serious injuries, accidents, or surgery? If so, please give date and describe briefly: _____

Present Health Situation

Does your child wear glasses? _____ For what condition? _____

Does child wear a hearing aid? _____

Does child have allergies? _____

Is child on medication? _____ For what condition? _____

Does child contract colds easily? _____ Often have nosebleeds? _____

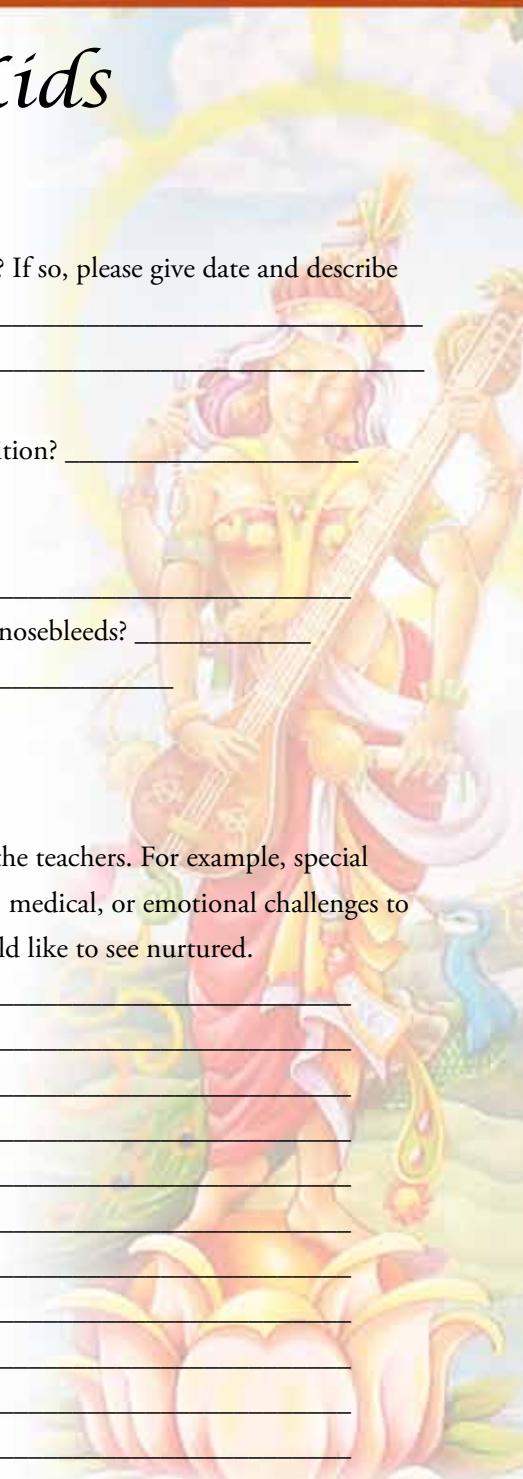
Have frequent headaches? _____ Have high fevers? _____

Have respiratory weakness? _____

Portrait

Please note details about your child which will be helpful to the teachers. For example, special interests and abilities; physical characteristics; any behavioral, medical, or emotional challenges to overcome; social strengths and weaknesses; qualities you would like to see nurtured.

Parent _____ Signature Date _____





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Shine On Kids Media Statement

Electronic media, especially television, has become a pervasive feature of American life. The Waldorf philosophy, consistent with other expert research and advice, questions the value of this technology for children. Since children, particularly those under the age of nine, are so deeply affected by everything in their environment, television not only affects their behavior and performance in school, but can have a profound and lasting influence on their lives as well.

The teachers at Shine On Kids recognizes that television viewing falls in the domain of the family and that it is parents who must decide what role electronic media will play in their child's life. Teachers urge parents, however, to approach television & video watching, and computer use with thoughtfulness and caution, and encourage them to seek out alternative activities for their children.

The teacher will discuss media issues with you at the time of your interview.

