

**Application for Enrollment**  
**Sonshine Preschool**  
**2020**

Please return the completed application form and \$65.00 registration fee to: (required to hold placement)

**Sonshine Preschool, 700 E. Olive St., Marshalltown, IA 50158**

Contact information: email: [sally@journeymtown.com](mailto:sally@journeymtown.com), phone: 641-753-3082 Ext. 31 & website: [www.journeymtown.com](http://www.journeymtown.com)

**Name of child:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Guardian 1: Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-mail: \_\_\_\_\_ *(please print clearly)*

**Guardian 2: Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-mail: \_\_\_\_\_ *(please print clearly)*

How did you hear about Sonshine Preschool? (check all that apply)

Recommended by family/friends       Internet Search       Ad in American Legion Golf Guide

Facebook       Saw our sign by church

Other: \_\_\_\_\_

**Please choose:**

*(Recommendation: If your child has a summer birthday, many parents consider placing their 4-year-old in the 3-year-old program. We have experienced that the younger children are better equipped for our 4-year-old curriculum if they have had a year of preschool previously)*

**4-5 year-old program** (must be 4 years-old by Sept. 15, 2020 & toilet-trained) Fall 2020 – Spring 2021

**3-4 year-old program** (must be 3 years-old by Sept. 15, 2020 & toilet-trained) Fall 2020 – Spring 2021

**2-3 year-old program** (must be at least 2-years-old, can enter program anytime throughout year)

**Please answer the following questions:**

Has your child had previous preschool or childcare experience? No  Yes

If yes, where? \_\_\_\_\_

Does your child have any special needs (allergies, health concerns, separation anxiety, developmental delays, ADHD/ADD tendencies, Autism/Ausberger spectrum, etc.) that the Sonshine Preschool Staff should know? No  Yes

If yes, please explain \_\_\_\_\_

Has your child been referred for additional services or currently have an IEP (*Individualize Educational Program*)?

No  Yes

If yes, please explain \_\_\_\_\_

For office use only: Registration fee paid <input type="checkbox"/> Confirmation sent <input type="checkbox"/> Parents joined BLOOMZ <input type="checkbox"/>
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## Program Options

**Instructions:** Please choose from the Preschool Only Options **OR** Extended Care Options

### Preschool Only Option:

Nine months of payments Sept. – May (based on 37 weeks Aug. 25 -May 21)

(Please indicate 1 for first choice and 2 for second choice – enrollment will be based on availability)

<p><b>2 – 3 year-olds:</b> <i>(limited number of openings)</i> <i>Time based on age &amp; enrolled siblings</i></p> <p>___ 3-days/wk: \$155/month ___ 2-days/wk: \$105/month</p>
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<p><b>3 - 4 year-olds:</b> 9:00 – 11:30 am</p> <p>___ 5-days/wk: \$185/month ___ 3-days/wk: \$110/month ___ 2-days/wk: \$80/month</p> <p><i>Scholarships available for qualifying families</i></p>
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<p><b>4 - 5 year-olds:</b> 8:45 – 11:30 am</p> <p>___ 5-days/wk: \$185/month ___ 3-days/wk: \$110/month</p> <p><i>Scholarships available for qualifying families</i></p>
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### Extended Care Options:

**Full-Day including Preschool: 7:15 am – 5:15 pm** (weekly payment - special rates for weeks of Thanksgiving, Christmas & Easter Breaks) Parents may pay **weekly or 4 weeks** at a time. Payment is non-refundable for absences due to vacations, illness, weather conditions, etc.

<p><b>2 – 3 year-olds:</b></p> <p>___ 5-days/wk: \$160/week ___ 3-days/wk: \$96/week ___ 2-days/wk: \$64/week</p>
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<p><b>3 - 4 year-olds:</b></p> <p>___ 5-days/wk: \$150/week ___ 3-days/wk: \$90/week ___ 2-days/wk: \$60/week</p> <p><i>(scholarships are subtracted from total)</i></p>
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<p><b>4 - 5 year-olds:</b></p> <p>___ 5-days/wk: \$150/week ___ 3-days/wk: \$90/week</p> <p><i>(scholarships are subtracted from total)</i></p>
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### Part-Day including Preschool:

**Option 1: Preschool & Early Morning Care: 9 monthly payments**

<p><b>2 – 3 year-olds:</b> 7:15 – 11:15 am</p> <p>___ 3-days/wk: \$220/month ___ 2-days/wk: \$145/month</p>
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<p><b>3 - 4 year-olds:</b> 7:15 – 11:30 am</p> <p>___ 5-days/wk: \$280/month ___ 3-days/wk: \$175/month ___ 2-days/wk: \$120/month</p> <p><i>(scholarships are subtracted from total)</i></p>
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<p><b>4 - 5 year-olds:</b> 7:15 – 11:30 am</p> <p>___ 5-days/wk: \$280/month ___ 3-days/wk: \$175/month</p> <p><i>(scholarships are subtracted from total)</i></p>
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**Option 2: Preschool & Afternoon Extended Care: 9 monthly payments**

<p><b>2 – 3 year-olds:</b> 9:00 am – 5:15 pm</p> <p>___ 5-days/wk: \$580/month ___ 3-days/wk: \$350/month ___ 2-days/wk: \$235/month</p>
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<p><b>3 - 4 year-olds:</b> 9:00 am – 5:15 pm</p> <p>___ 5-days/wk: \$540/month ___ 3-days/wk: \$330/month ___ 2-days/wk: \$220/month</p> <p><i>(scholarships are subtracted from total)</i></p>
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<p><b>4 - 5 year-olds:</b> 8:45 am – 5:15 pm</p> <p>___ 5-days/wk: \$540/month ___ 3-days/wk: \$330/month</p> <p><i>(scholarships are subtracted from total)</i></p>
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## Scholarship Information

\*Scholarships available for qualifying families using the Annual Income Scale below:  
*applies only for 3-5 year-olds & the Preschool portion of the day*

<u>Number in family</u>	<u>Income Range</u>	<u>Number in family</u>	<u>Income Range</u>
2	\$17,240 – \$34,480	6	\$34,590 –\$ 70,320
3	\$21,720 – \$43,440	7	\$39,640 –\$ 79,280
4	\$26,200 – \$52,400	8	\$44,120 –\$ 88,240
5	\$30,680 – \$61,360		

### ATTENTION PARENTS:

- Once your child’s application has been processed, **you will receive an email** with instructions to join our communication network called **BLOOMZ**.
- BLOOMZ will help the director connect instantly with individuals or groups of parents.
- All communications with parents will be through BLOOMZ including distribution of additional File Information forms, newsletters, weather announcements, reminders, etc. Messages may contain attachments that will sometimes need to be printed out.
- Parents may choose whether to **receive messages via text and/or email**. Parents will be able to download an app on their smartphone.

I am submitting a **non-refundable \$65 registration/educational supply fee** with my application. Should our preschool plans change, I will contact Sonshine Preschool to remove my child from the class roster **before August 1st**.

Signed \_\_\_\_\_  
(Guardian’s signature)

Date \_\_\_\_\_