



FIRST STEPS PRESCHOOL

Success Without Boundaries

First Steps Preschool Application

Date: _____

First Steps Preschool offers the following programs for preschool aged (3-5 year old) children who live in District 63. Classes meet Monday-Friday for two and a half hours per day at Apollo, Melzer, or Washington.

For information, call Marykaye Roycroft at 847.745.6487.

Community Tuition Program	Preschool For All (At-Risk) Program
<p>The program features a research-based, developmentally appropriate curriculum with a strong emphasis on language, motor, social, independence, and pre-kindergarten skills. Children three years and older are accepted throughout the school year, and the program has several blended classrooms where students with special needs and community students attend together. Tuition for the 2019-2020 school year is \$3050. Applications will be accepted on a first-come, first-served basis with priority given to returning students. A \$50 non-refundable fee is due with this application. There is a discount if tuition is paid in full or for multi-child families.</p>	<p>Through a grant from the Illinois State Board of Education (ISBE), District 63's First Steps At-Risk Preschool serves District children who are "at-risk" for school difficulties. The goal is to provide early, continuous, intensive, and comprehensive education, as well as family support services, to help prepare the children for later school success. Children must qualify for this free program and the District prioritizes children who are in greatest need based on an eligibility checklist. Once an application is completed and returned, your child will be added to the waiting list to be screened. A Dual Language Spanish classroom is available for native Spanish speakers.</p>

Please check the program you are interested in applying for: Tuition Program Preschool for All (At-Risk) Program

Child's Information: First Name: _____ Last Name: _____

Date of Birth: _____ Male Female Primary Phone #: _____

Address: _____ Apt#: _____ City: _____ Zip Code: _____

Primary Language Spoken by Child: _____ Primary Language Spoken at Home: _____

Is your child attending a preschool or daycare now? Yes No If "yes", where? _____

Parent/Guardian Information: Please check primary contact- Father Mother

Father's Name: _____ Mother's Name: _____

Father's Cell Phone #: _____ Mother's Cell Phone #: _____

Father's Email: _____ Mother's Email: _____

Check Your Session and School Preference (Thank you in advance for your understanding, as we will be unable to grant every request):

A.M. P.M. No Preference

Apollo Melzer Washington No Preference

The documents below must accompany this application:

- Original birth certificate.
- Picture identification of parent/guardian (driver's license, state ID, passport).
- Current lease or mortgage statement.
- Three other proofs of address (utility bill, phone bill, etc.)

Do you have concerns about your child's development? Yes No If "yes" is checked, please complete the second page.

PLEASE NOTE: Completed applications and documents must be submitted IN PERSON to the Early Childhood Program at Melzer School, 9400 North Oriole, Morton Grove.



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Please complete if you have concerns about your child's development.

Has your child been evaluated for developmental issues (e.g. speech/language delay)? Yes No

If "yes," When: _____ Where: _____

Check the areas where you have concerns about your child's development (Please answer questions below related to the area(s) of concern):

- Speech and Language Behavior Socialization Attention Motor Play Skills

Speech and Language

1. Can your child answer a variety of questions? (Who, what, where, why, when, etc.) Yes No
2. Do non-familiar people (family members, strangers, teachers) have a hard time understanding what your child is saying? Yes No
3. How many words are in your child's vocabulary? _____ Words
4. How many words can your child connect when speaking? (ex. I want the car-4 words) _____ Words
5. Can your child follow one to two step directions or commands? Yes No

Behavior

1. When your child does not get his/her way, do they tantrum? Yes No
 - a. How long does it take them to calm down after a tantrum? _____ Minutes
2. Does your child hit children or adults when upset? Yes No
3. Is it hard for your child to change from one activity to another when requested? Yes No

Socialization

1. Does your child prefer to play alone or with other children? Alone With Other Children
2. Does your child consistently respond to his/her name (without you touching them)? Yes No

Attention

1. Does your child typically finish activities he/she starts? Yes No
2. How long is your child able to play with a toy that they like? _____ Minutes
3. Does your child wait for directions before starting an activity or task? Yes No
4. Will your child attempt a challenging activity? Yes No If "Yes", for how long? _____ Minutes

Motor

1. My child can independently (Check all that apply):
 Throw or Catch a Ball Go Up/Down Stairs with Alternating Feet Use Playgroup Equipment
2. My child can hold a crayon and (Check all that apply): Scribble Imitate Lines or Circles
3. My child can (Check all that apply): Sting Beads Open Containers Snip with Scissors

Play Skills

1. Does your child act out pretend with 2-3 steps (ex. cook food, serve food, and clean it up)? Yes No
2. Does your child use substitute objects to represent real ones (ex. block for phone)? Yes No
3. Does your child copy you when you sing songs with word/hand motions (ex. twinkle twinkle)? Yes No

Please describe any other concerns you have that may not have been asked above:

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