

REGISTRATION FOR PRE-KINDERGARTEN EDUCATION (2015-16)
for children ages 3-5 living in the Springfield School District

Today's date _____ Child's Town of Residence _____

Child's Name: _____ Child's Date of Birth _____ *Your child must be 3 by September 1, 2015.*

Parent/Guardian's Name _____

Mailing Address: _____ Physical Address: _____

Telephone: (primary) _____ (alternate phone) _____

Email _____

*Pending approval from the Agencies of Education and Human Services, the programs listed below partner with Springfield School District to provide public pre-kindergarten education. **While this form will register your child for publicly funded pre-k, you are also required to contact the program directly to inquire about enrolling your child.** Contacts, phone numbers and addresses are provided for your convenience.*

1. **Dandelion Wishes:** Jen Berquist, 885-3118; 73 Olive St. Springfield
2. **Little Stars:** Staci Otis, 885-3029; 140 Fairground Heights, Springfield
3. **Pine Street Preschool:** Jodi Farashahi, 885-6669; 107 Park St. Springfield (office); 15 Pine Street (classrooms)
4. **PlayWorks:** Michelle Stinson, 886-5242; 6 Main St., N. Springfield
5. **Safe N' Sound:** Rachel Hunter, 886-1070; 68 County Rd., N. Springfield
6. **Saxtons River Montessori School:** Theresa Spear, 869-3349; PO 98 Saxtons River
7. **Springfield Learning Garden:** Crystal Simpson, 885-5077; 33 Pleasant St., Springfield
8. **Squeaky Sneakers, Springfield:** Amelia Struthers, 885-5541; 365 Summer St., Springfield
9. **Suzy's Little Peanuts:** Suzy Coutermarsh, 885-7899; 132 Chester Rd., Springfield
10. **World of Discovery III:** Corina Wood, 885-8380; 308 S. Street, Springfield

Is your child currently enrolled in a pre-k program? Yes No

If yes, name of program _____

If no, please name the program(s) you are interested in _____

I understand that by enrolling in public pre-k and receiving the public funding, my child will be counted by the school district in which my child resides, and will be considered a student of that school district. Teaching Strategies GOLD assessment and demographic information will be shared with the Springfield School District and the VT Agency of Education.

Parent/guardian signature _____ Date _____

Registration forms may be returned to any pre-k partner program, any site that provides pre-k registration forms, by mail or email to:

Gladys Collins
10 Hoover St.
Springfield, VT 05156
802-885-1150
gcollins@ssdvt.org