

St. Peter Preschool

15701 Cleveland Gibbs Road, Roanoke, TX 76262
(817) 491-2015 stpeterfw.org



Enrollment Application and Information Packet 2022-2023

To reserve space in your child's classroom, submit the following to the St. Peter Church & Preschool office located at 15701 Cleveland Gibbs Road, Roanoke, Texas 76262:

_____ **Your completed Application (pages 1 - 5)**

Complete and sign the Application (pages 1 - 5). All spaces must be filled in; if a question does not apply, please write "N/A". Please print in blue or black ink.

_____ **Appropriate Annual Registration Fee**

Registration fees are non-refundable unless the student is not accepted for enrollment. *(Currently enrolled students may add the registration fee to their FACTS account.)*

- Registration on or before March 31, 2022- **\$250**
- Registration after March 31, 2022 - **\$300**

To be admitted to the first day of classes:

_____ **Make first tuition payment using FACTS by August 17, 2022**

If you are not already enrolled in FACTS, register for FACTS by clicking on the link located on the Tuition & Fees tab of the St. Peter website (stpeterfw.org). Submit a copy of your FACTS enrollment confirmation to the St. Peter Church & Preschool office by July 1, 2022.

If you register after August 1, 2022, the registration fee and the first month's tuition is due upon enrollment.

_____ **A copy of your child's complete Immunization Record or signed Affidavit form (which can be found at www.dfps.state.tx.us)**

Please submit a copy of the **current Immunization Record** to the school office prior to the first day of school or send a copy of the Immunization Record with your child on the first day of school. Returning students must submit a copy of their Immunization Record, as well.

_____ **Form B-1 completed by the child's physician (if not already on-file) or Form B-2 completed by the child's parent or legal guardian**

Forms B-1 and B-2 may be found on the Enrollment / Forms tab of the St. Peter website (www.stpeterfw.org) or obtained from the school office. Please have the form completed and signed. Many physicians' offices will allow the form to be sent to them via fax.

Notice of Non-Discriminatory Policy: St. Peter Preschool does not discriminate on the basis of gender, race, color, national or ethnic origin in the administration of our educational policies, employment practices, admission policies, scholarship and loan programs, and other school administered programs.

Liability Notice: Documentation of liability insurance that complies with Human Resources Code, Section 42.0491, is available in the office of the Church/School Administrator.



2022-2023 Placement Guide

When choosing a class for your child, we want the best fit! Please use the following indicators as a **guide** to choose your child's class. Your child may not meet each indicator, but he or she should demonstrate strengths in several areas of the indicators. If you have questions, please call or meet with the director to discuss placement.

Foundations Class (2's) The Foundations class prepares students for structure, routine, and social play. The class introduces students to dramatic play, music, visual arts, literacy, and mathematics. Indicators of readiness for the Foundations class include:

- **Age:** 2 years old (by September 1 of the enrolled school year)
- **Language and Literacy:** follows simple requests; uses some words; may recognize a few letters in his or her name; shows interests in books; beginning scribbles
- **Cognition and General Development:** matches similar objects; imitates actions; recognizes familiar people, objects, and animals in pictures
- **Approaches to Learning:** sustains some interest in working on a task, but cannot ignore distractions; enjoys exploration and investigation

Fundamentals Class (3's) The Fundamentals class is centered on core knowledge instruction. The class continues to foster social play, dramatic play, music, and visual arts. Instruction in literacy, mathematics, and handwriting is structured, systematic, and individualized. Indicators of readiness for the Fundamentals class include:

- **Age:** 3 years old (by September 1 of the enrolled school year)
- **Language and Literacy:** follows two-step directions; understood by most people; can speak 4-6 word sentences; recognizes letters in his or her name and possibly a few other letters; begins writing letter-like forms or mock letters
- **Cognition and General Development:** recalls familiar objects and can sequence experiences; classify in two or more groups; begins dramatic play
- **Approaches to Learning:** sustains interest in working on a task and beginning to ignore most distractions; pursues a variety of tasks and an eagerness to learn; transitions from parallel play to associative play
- **Mostly potty trained:** understands the concept of being potty trained, but may still need some reminders and may still be prone to accidents

Pre-Kindergarten Class The Pre-Kindergarten class is designed to ready students for the rigors and expectations of Kindergarten. Indicators of readiness for the Pre-Kindergarten class include:

- **Age:** 4 years old (by September 1 of the enrolled school year)
- **Language and Literacy:** begins to recognize rhyming words; shows awareness that some words begin the same way; recognizes as many as 10 letters; produces the correct sound for several letters
- **Cognition and General Development:** uses more details in experiences; begins to apply experiences to new situations; begins to interact with other children during dramatic play
- **Approaches to Learning:** sustains work on interesting tasks while ignoring most distractions; begins to use a variety of resources to find answers to questions
- **Fully potty trained**

St. Peter Preschool

15701 Cleveland Gibbs Road, Roanoke, TX 76262



Scholars ● Servants ● Saints

Phone: (817) 491-2015
FAX: (817) 491-2022
Email: Jmurff@stpeterfw.org
Website: stpeterfw.org

(Please print throughout the application in blue or black ink and sign the bottom of every page.)

FOR OFFICE USE ONLY (2022/2023)

Date registered _____
Starting date _____
\$ _____ Check # _____
\$ _____ Cash Receipt # _____
\$ _____ Applied to FACTS _____

Student Information

Applicant for admission to: Foundations Fundamentals Pre-Kindergarten

First Name: _____ Middle: _____ Last: _____

Preferred Name: _____

Date of Birth: _____ Male Female

SIBLINGS

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

Name: _____ Age: _____ School: _____

FAMILY CHURCH MEMBERSHIP INFORMATION

Name of Church: _____ Denomination: _____

We are not members of a church.

Our family holds membership in several churches (please explain): _____

Is student baptized? Yes No Baptism date: _____

ETHNIC ORIGIN

African-American Asian-American Caucasian East Indian Middle Easterner Native American

Hispanic/Latino Pacific Islander Other (please explain): _____

Is a language other than English spoken at home? Yes No If yes, Occasionally Often What language(s) _____

STUDENT LIVES WITH *(please check ALL that apply)*

Father Mother Stepfather Stepmother Guardian Other (please explain): _____

Please check ALL that apply *(Please provide a copy of any court-ordered custody documents, when necessary):*

Parents are separated Parents are divorced

Father has custody Mother has custody Parents have joint custody Guardian has custody

Father is remarried Mother is remarried

Father is deceased Mother is deceased

Parent Signature: _____

Family #1 (primary residence)

Home address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Father Stepfather Other: _____ Mother Stepmother Other: _____

Title: _____ First Name: _____ MI: _____ Title: _____ First Name: _____ MI: _____

Last Name: _____ Last Name: _____

Employer: _____ Employer: _____

Work phone: _____ Work phone: _____

Cell phone: _____ Cell phone: _____

Primary phone: Home Work Cell Primary phone: Home Work Cell

E-mail: _____ E-mail: _____

(**School communications are regularly sent via email) (**School communications are regularly sent via email)

May pick up child without special note Yes No May pick up child without special note Yes No

Responsible for: school related decisions Responsible for: school related decisions
 school communications school communications
 financial bills financial bills

Family #2 (secondary residence, if applicable)

Home address: _____

City: _____ State: _____ Zip: _____ Home phone: _____

Father Stepfather Other: _____ Mother Stepmother Other: _____

Title: _____ First Name: _____ MI: _____ Title: _____ First Name: _____ MI: _____

Last Name: _____ Last Name: _____

Employer: _____ Employer: _____

Work phone: _____ Work phone: _____

Cell phone: _____ Cell phone: _____

Primary phone: Home Work Cell Primary phone: Home Work Cell

E-mail: _____ E-mail: _____

(**School communications are regularly sent via email) (**School communications are regularly sent via email)

May pick up child without special note Yes No May pick up child without special note Yes No

Responsible for: school related decisions Responsible for: school related decisions
 school communications school communications
 financial bills financial bills

Please note, Family #2 will receive duplicate mailings.

Parent Signature: _____

Emergency Contacts

If Family #1 and/or #2 contacts cannot be reached. Must have at least **two** emergency contacts.

Emergency contact #1: _____ Relationship to student: _____

Address: _____ City: _____ State: _____

Home phone: _____ Work phone : _____ Cell phone : _____

Primary phone: Home Work Cell

May pick up without note. If so, DL #: _____ Vehicle License Plate #: _____

Emergency contact #2: _____ Relationship to student: _____

Address: _____ City: _____ State: _____

Home phone: _____ Work phone : _____ Cell phone : _____

Primary phone: Home Work Cell

May pick up without note. If so, DL #: _____ Vehicle License Plate #: _____

Please write any additional emergency contacts and their information on a blank sheet of paper and attach it to this page.

Emergency Medical Release

In case of emergency, please take my child to: (Due to licensing regulations, please do not enter "nearest". We must have the actual name of the hospital and provider you prefer.)

Hospital Name: _____ Phone: _____

Address: _____

Physician Name: _____ Phone: _____

Address: _____

I, _____, authorize St. Peter Preschool to obtain emergency medical care for my child,
(Parent / Guardian's Name)

_____, and/or to transport my child for emergency medical treatment. Yes No
(Student's Name)

Publication Release

Photographs and videos are taken on different occasions such as performances, holidays, outings, and special events. We use these pictures and videos in our school for teaching, arts & crafts, albums, and various other activities. We will not use your child's image in publications distributed outside of the school unless you provide "unrestricted usage" authorization.

Limited usage: I agree to my child's image used within the St. Peter Church & Preschool setting only (not in the larger community).

Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by St. Peter Preschool for a variety of purposes, including advertising, and that these images may be used without further notifying me.

Parent Signature: _____

Health Statement Admission Requirements

FORM B-1 or B-2: One of the following must be presented within one (1) week of your child's admission to St. Peter Preschool. Please check your indicated option.

- PHYSICIAN'S STATEMENT:** Statement showing the physician has examined the child within the past year and found him/her to be physically able to take part in the St. Peter Preschool program. (Form B-1)
- A form or written statement from a clinic or health service.
- MEDICAL AFFIDAVIT:** Signed statement from the parent or legal guardian stating that medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization of which the parents or legal guardians are an adherent or a member. (Form B-2)

VISION & HEARING SCREENING: All children 4 years old by September 1 of the current year are required to submit a copy of a current vision and hearing screening. These screenings are normally conducted in conjunction with the child's annual well exam or you may opt to have the screening performed elsewhere. All screening results are to be turned into the school office by October 1 of the current school year.

General Health Information

- General health of student: Poor Fair Good Excellent
- Allergies? No Yes (If "yes", please explain), _____
- Physical disabilities or limitations: (*glasses, scoliosis, hearing, etc.*)? No Yes (If "yes", please explain), _____
- Dismissal from Physical Education? No Yes ("Yes" requires note from doctor)
- Is the student taking medication regularly? No Yes (If "yes", please explain), _____
- Has the student ever had any psychological counseling? No Yes (If "yes", please explain the nature of the counseling on a separate sheet of paper, which **will not** become a part of the student's permanent record.)
- Has the student ever been dismissed or withdrawn from any school for any reason? No Yes (If "yes", please explain, including name and address of school) _____
- Does the student have any developmental delays? No Yes (If "yes", in what areas?), _____
- Does the student have any clinically diagnosed learning disabilities? No Yes (If "yes", please explain), _____
- Has additional special testing or tutoring been necessary at any point in school? No Yes, (If "yes", what age and in what areas?) _____
- Is your child potty trained? No Yes (If yes, what does your child say when they need to use the restroom?), _____
- Please use the space below for any other pertinent information about the applicant or family situation that would assist us in meeting our shared commitment to your child. _____

Parent Signature: _____

Program Selections

Please refer to the enclosed 2022-2023 Daily Schedules for which days, programs are available, and please check all that apply:

Before School Care Monday Tuesday Wednesday Thursday Friday

Foundations 2's (9am-12pm) _____ **Foundations 2's (9am-2pm)** _____
 Mon/Wed _____ Tues /Thurs _____ Mon-Thurs _____

Fundamentals 3's (9am- 2pm) _____ **Pre-K (9am- 2pm)** _____
 Mon/Wed _____ Mon/Wed/Fri _____ Mon-Thurs _____
 Tues/Thurs _____ Tues/Thurs/Fri _____ Mon-Fri _____

Nutrition

You are responsible for your child's snacks and/or lunch. We are not responsible for its nutritional value or for meeting your child's daily food needs.

Parent Volunteer

We love volunteers, but please note volunteering is not required. Various events are held throughout the school year and if we need volunteers, we will ask. If you are interested in volunteering in the classroom, please contact your teacher directly. Your teacher will let you know if or when help is needed. Thank you for any help you can offer.

How did you hear about St. Peter Preschool?

- from my current school
- from a sibling
- from my church
- from the website
- from ad/letter received in mail
- from a friend/relative _____
- from a newspaper/magazine ad (which one?) _____
- other _____

Contractual Agreement

Must be signed by ALL individuals listed on page 2 who are responsible for school related decisions AND/OR financial bills.

We the undersigned:

I. Agree to fulfill all financial obligations

A. Tuition and fees will be paid timely. Students with tuition in arrears may be withheld from class until payments are current.

B. In the event of withdrawal or dismissal, all tuition and fees paid to date are non-refundable and tuition will be charged through the end of the month.

II. We have read and agree to abide by St. Peter Preschool's guidelines as outlined in the Student Handbook, which may be downloaded from the website.

Signature _____ Date _____ Signature _____ Date _____

Signature _____ Date _____ Signature _____ Date _____



2022-2023 Daily Schedule - Foundations

Preschool Hours For Foundations 2's

Foundations (Half Day)	9:00 am — 12:00 pm
Foundations (Full Day)	9:00 am — 2:00 pm

Foundations 2's

Welcome / Group Table Play	
Circle Time	
Religion Lesson	Chapel
P.E.	
Snack	
Music and Movement	
Centers	
Recess	
Teaching Lesson	
Art	
Story Time/ Reading/ Music	
Lunch	
Dismissal for 1/2 Day Students	
Rest Time	
Recess	
Closure / Group Table Play	
Dismissal for Full Day Students	



2022-2023 Daily Schedule - Fundamentals

Preschool Hours For Fundamentals 3's

Fundamentals

9:00 am — 2:00 pm

Fundamentals 3's

Welcome / Centers

Calendar

Bible Time (M, T, F)

Chapel (W, TH)

Table Top Centers - T, TH

Letter of the Week (Book, Song, and Video)

P.E.

Snack

Centers

Book of the Day

Music - M, TH

Art - T, W

Discovery - F**

Recess

Lunch

Read Books

Rest Time

Recess

Centers / Dismissal

**Friday is Discovery Day which allows students to delve into sensory and experiential learning while having fun with experiments and exciting hands-on activities special to the weekly theme each week.



2022-2023 Daily Schedule - Pre-Kindergarten

Preschool Hours For Pre-Kindergarten

Pre-Kindergarten

9:00 am — 2:00 pm

Pre-Kindergarten

Welcome / Mini Centers

Carpet Time - Pick Helper, Calendar, Daily Math, Daily Literacy, Theme Big Idea & Song

Bible Time (M, T, F)

Chapel (W, TH)

P.E.

Snack

Theme Read Aloud

Handwriting - M, T,

Fine Motor - W, TH,

Discovery - F**

Literacy Centers - M, T, F

Art - W, TH

Theme Centers

Recess

Lunch

Rest Time

Math Centers

Recess

Dismissal

**Friday is Discovery Day which allows students to delve into sensory and experiential learning while having fun with experiments and exciting hands-on activities special to the weekly theme each week.



2022-2023 Fees & Registration

Registration Fees* (due upon registration)	
	Preschool
Before March 31, 2022	\$250
After March 31, 2022	\$300

Tuition (payable in 10 monthly installments beginning Aug. 17, 2022)*				
Class	M/W or T/TH	M/W/F or T/TH/F	Mon-Thurs	M-F
Foundations 2's	Half - \$1850/yr. Full - \$2850/yr.	NA	Half- \$3500/yr. Full- \$4850/yr.	NA
Fundamentals 3's	\$2850/Yr.	\$3900/yr.	\$4850/yr.	\$5800/yr.
Pre- Kindergarten	\$2850/yr.	\$3900/yr.	\$4850/yr.	\$5800/yr.

Extension Program Tuition (for 10 months)*				
Program	M/W or T/TH	M/W/F or T/TH/F	Mon-Thurs	M-F
Before School Care	\$450/yr.	\$625/yr.	\$800/yr.	\$975/yr.

Registration and Tuition Fees

Subject to change without notice

*Please contact the school office if you have any questions.

Tuition Payments and Discounts

Tuition and registration fees include school supplies and curriculum. Tuition does not include lunches, snacks, events, or other miscellaneous items.

Tuition payments will be paid in 10 monthly installments, starting August 2022 and ending May 2023.

Payments made in full by August 17, 2022 receive a 5% discount on school tuition. If you are not already enrolled in FACTS, register for FACTS by clicking on the link located on the Tuition & Fees tab of the St. Peter website (www.stpeterfw.org). Submit a copy of your FACTS enrollment confirmation to the St. Peter Preschool office as soon as possible. Tuition and registration fees are non-refundable.

Checks, cash, credit or debit cards are also accepted each month, but a 3% processing fee will be added to each credit or debit transaction. Siblings receive a 5% discount. The highest school tuition rate is applied first. The second child, third child, etc. will receive 5% on remaining school tuition rates. Multi-child discounts are cumulative.