

Webster Public Schools

Integrated Preschool Program



Application for Enrollment Information 2024-2025

Webster Public Schools - 77 Poland Street - Webster, MA 01570 Phone - 508-943-3646; Fax - 508-949-2364

The Webster Schools Integrated Preschool Program anticipates openings in both the morning and afternoon preschool classes for the 2024-2025 school year. The Integrated Preschool Program provides children with and without special needs a quality early childhood education.

This form is an invitation to apply for the available openings for non-disabled peers for the Integrated Preschool Program for the 2024-2025 school year. Your child <u>MUST</u> be 4 years old before September 1, 2024 and a resident in the Town of Webster in order to be considered eligible to apply.

<u>Completed applications will be accepted from March 1, 2024 through March 31, 2024 at the Student Services</u> <u>Department, Webster Public Schools District Office located at 77 Poland Street in Webster. Completed</u> <u>applications can be dropped off between the hours of 10:00 a.m. and 2:00 p.m. at this office. You may also</u> <u>email them to: msanterre@webster-schools.org</u> The Registration process will take place at a later date.

All applicants will be given an appointment for a screening after we receive your application. You will also be asked to complete a Screening Questionnaire. This screening is needed to determine the child's eligibility as a non-disabled peer. Upon completion of the screening process, we will provide an acceptance letter with instructions for registering your child for preschool. If necessary, a lottery will be held for eligible children the week of May 6, 2024, and applicants will be notified about their status no later than May 15, 2024. This will take place if there are more eligible applicants than slots available. Those not chosen for an open slot will be placed on a waiting list to be considered for future openings as they become available. All applicants will be invited to participate in an open house in June 2024.

Children will be chosen for placement in one of 4 half-day sessions. The proposed times for the Preschool Program are as follows:

AM Sessions (2)	Tuesday – Friday	8:30 AM – 11:00 AM
PM Sessions (2)	Tuesday – Friday	12:15 PM - 2:45 PM

<u>*Please note that transportation is the the responsibility of the parent*</u>

At this time, we anticipate that the final registration process will be completed by June 1, 2024 and that all openings will be filled no later than June 30, 2024.

Please note that the District Administrative Office is located at **77 Poland Street**, Webster, MA on the Bartlett High School Campus in the back of the building where the District Administration green awning is located.

	Webster Public Schools-Integrated Preschool ProgramApplication for Enrollment SY 2024-2025Webster Public Schools * 77 Poland Street * Webster, MA 01570 Phone - 508-943-3646; Fax - 508-949-2364		
Child's Name:			
	*DOB// SEX (circle one): M F Non Binary		
Parent(s) Names: Street Address: *Town/ZIP:			
Phone: Email Address:	Home: Cell:		
* Children must be four years old before September 1, 2024 AND a resident of the town of Webster at the time of application, in order to be eligible for enrollment in September 2024. There will be NO exceptions.			
Session Preference: (Ch	neck One)		
	4-days/Tuesday - Friday - Morning Session (8:30 AM - 11:00 AM)		
	4-days/Tuesday - Friday - Afternoon Session (12:15 PM - 2:45 PM)		
*While there is no guarantee that the session/location you prefer will be available, we attempt to place your child according to preference, if possible.			
Please answer the following questions to complete this application:			
Is your child currently receiving Birth to Age 3 services through Early Intervention or have they previously? Yes No			
Is your child currently receiving services through the Webster Public Schools? Yes No			
If yes to either of these questions, please note what type of service is currently being provided (for example, Speech, Occupational Therapy, Physical Therapy, etc.)			
I have read and understand the above information related to the Integrated Preschool Program.			
Parent Signature	Date		
-Central Office Use Only- Receipt Date:/			
Screening Date & Time:	Screening Results:		

Wait List #: _____

Received By: _____