## MORGAN LOCAL SCHOOLS

65 WEST UNION AVENUE P.O. BOX 509 McCONNELSVILLE, OH 43756

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DIR. OF SPECIAL PROGRAMS

## PRESCHOOL APPLICATION FORM

Elementary School Attendance Area:	
Child's Name:	
Birth Date:	Age:
Parent or Guardian Name(s):	
Child's Address:	
Phone Number(s) at Which You Can Best Be Reached:	
Email Address:	
Check which option you would like to apply for. Yo ☐ Option 1: Tuition Based Program • 4 days a week • Fee is required • This is the year before kindergarten	ou can check both options.
<ul> <li>□ Option 2: Income Based Program</li> <li>2 days a week</li> <li>No fee required</li> <li>This is only located at EAST and SOUTH</li> <li>You must meet income guidelines to qual</li> <li>Selected applications will be redirected to</li> <li>□ Both options</li> </ul>	alify for this program

## \*IMPORTANT NOTES:

- Applications are due to the attendance area elementary school by FRIDAY, MAY 2, 2025
- Acceptance calls will be made the week of May 12-16, 2025