



DCE 4K Enrollment Form

Yog nej muaj lus nug dabtsi thiab xav kom muaj pab txog nej cov menyuam mus nug tau rau ntawm lub tsev kawm ntawv nyob ze nej.

Child's Name _____ Telephone _____
(Last Name) (First Name) (Middle Name)

Home School

[Click here to view Elementary School Boundaries](#)

Our home elementary school is (check one below)

- ☐ Evergreen ☐ Hatley ☐ Mountain Bay ☐ Riverside
☐ Rothschild ☐ Weston ☐ Other District (open enrollment)

4K Partnering Sites

Aspirus YMCA Development Center
Head Start - w/Head Start Approval
Rothschild Elementary
Weston Elementary

Bethlehem Community Preschool & Childcare
Key to Life Childcare Center
Newman Catholic Early Childhood Center - St. Therese
Wausau Child Care - Cedar Creek

Enrollment Information

Please select session preference and partnering site from the list above, if any: (see Informational Brochure-please note AM/PM availability)

1st Choice: _____ ☐ AM ☐ PM ☐ Either
2nd Choice: _____ ☐ AM ☐ PM ☐ Either
3rd Choice: _____ ☐ AM ☐ PM ☐ Either

Busing

[Click here to view 4K School Busing Boundaries](#)

[Click here to view Busing Form](#)

- ☐ I will be providing transportation for my child 4K student.
☐ I wish to enroll my child in 4K and need transportation. ****Transportation is only provided for AM sessions****
(Site/Session offerings may be limited for those who require transportation.)

Childcare

I am interested in before and after care at the site requested for 4K ☐ Yes ☐ No ☐ Maybe

☐ My child will attend preschool/childcare at: _____

☐ I am applying for Head Start and I will register at Head Start, 6615 County Road J, Schofield, WI 54476

Special Considerations for Placement: