**Application for Aldersgate KinderPrep**

**Supplemental Kindergarten Form**

Please answer the following questions so that we can get an idea of your thoughts and expectations for KinderPrep’s kindergarten program. Feel free to add an additional sheet if necessary.

1. Why do you want your child to attend Aldersgate KinderPrep’s kindergarten program?

2. What are your expectations for a Kindergarten program? What development do you hope to see in your child during his/her kindergarten year?

3. How would you as a parent/family support your child’s kindergarten experience in the home? How would you instill growing independence in your Kindergartner?

4. What has your past association been with KinderPrep ? (For example, attendance by previous children.)

5. Has your child missed more than 10 days of school during the previous school year? \_\_\_\_\_\_\_\_\_\_\_ If yes, please explain.

6. Has your child experienced behavioral concerns at home or at school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If yes, please explain.

7. What else would you like us to know about your child?