

PLEASE  
ATTACH  
PHOTO HERE

*Hollingworth Preschool Application for Admission*

**PLEASE PRINT CLEARLY OR TYPE ALL  
INFORMATION. THANK YOU.**

**HOLLINGWORTH PRESCHOOL**  
TEACHERS COLLEGE, COLUMBIA UNIVERSITY  
525 West 120<sup>th</sup> Street, Box 170  
New York, NY 10027  
(212) 678-3403  
hollingworthpreschooladmissions@tc.edu

Child's Full Name \_\_\_\_\_ Name Child is Usually Called \_\_\_\_\_

(Please include the phonetic pronunciation of your child's first name) \_\_\_\_\_

Birth Date (Month/Date/Year) \_\_\_\_\_ Gender \_\_\_\_\_

Language(s) Spoken at Home \_\_\_\_\_ With which is your child most comfortable? \_\_\_\_\_

Home address \_\_\_\_\_

Parent's Full Name \_\_\_\_\_ Occupation \_\_\_\_\_ Employer and Position \_\_\_\_\_

Home address (if different from child) \_\_\_\_\_

Email \_\_\_\_\_ Preferred Telephone \_\_\_\_\_

Parent's Full Name \_\_\_\_\_ Occupation \_\_\_\_\_ Employer and Position \_\_\_\_\_

Home address (if different from child) \_\_\_\_\_

Email \_\_\_\_\_ Preferred Telephone \_\_\_\_\_

Marital Status \_\_\_\_\_ With Whom Does the Child Live? \_\_\_\_\_

Please share the names, ages, and schools of all children in the family. Include stepchildren, if applicable, even if they do not reside with your child.

Please share the names of other persons in the household and their relationship with your child.

Later this fall, Hollingworth Preschool will schedule a small group session for your child. Prior to your child's visit, we will review the information provided in detail. Your responses help us as we work to build rapport with your child, to best support your child's engagement, and to get to know your child. Thank you for your responses. Please handwrite or type your responses, using a 10-12 point font.

1. Select three words that first come to mind in describing your child. For each, explain why this selected word describes your child.

2. At Hollingworth Preschool, one way we build community in our classroom is through song and shared experiences. Inspired by the Rodgers and Hammerstein song "My Favorite Things," we invite each child to fill a brown paper package tied up with string with his or her favorite things. Sometimes our favorite things are keepsakes from a past experience, tokens that remind us of a place or loved one, or a preferred book or toy. What are a few of your child's Favorite Things?

3. Describe your child in a social setting. What group experiences has your child had? How does your child respond to familiar and unfamiliar people and environments?

4. How did you learn of Hollingworth Preschool? What motivated you to look into Hollingworth Preschool? In what ways do you think Hollingworth Preschool will be a good setting for your child and your family?

5. In considering your child's ongoing education, what are you currently thinking: public, private, either, or undetermined?

6. Is there anything else you'd like us to know about your child?

**Admissions Timeline**

The Hollingworth Preschool application includes a completed application form, submission of an application processing fee, and a small group visit for your child. We offer Early Notification Options for Sibling and Columbia University Affiliated families. The timeline below indicates our notification dates.

	Early Notification 1	Early Notification 2	Standard Notification
Application deadline	October 20th	December 13th	December 13th
Small Group Sessions	October 27th	Early January	Early January
Decision notification	Mid November	January 23rd	Early February
Enrollment Deadline for families offered a space for the 2018-2019 year	Early December	January 30th	Late February

**For Applicants with Siblings (current & former) and Columbia University-affiliated families ONLY:**

Please check and initial if you would prefer early notification 1  \_\_\_\_\_

Please check and initial if you would prefer early notification 2  \_\_\_\_\_

**Financial Aid**

We offer limited financial aid to eligible applicants. Please contact the preschool office to request a financial aid application at least one week prior to the application deadline. Families who request financial aid must submit a completed financial aid application by the application deadline.

**Class Enrollment Information**

We have two classes. Our Morning Class is comprised of children ages 3-4 (for most families, their child will turn 3 by August 31, 2018). Our Afternoon Class is comprised of children ages 4-5 (for most families, their child will turn 4 by August 31, 2018).

Please check and initial if you are applying on behalf of your child to Morning Class  \_\_\_\_\_

Please check and initial if you are applying on behalf of your child to Afternoon Class  \_\_\_\_\_

**Application Fee**

An application fee of \$50 is required to process the application. Checks must be made payable to **Teachers College**, and can be mailed to the preschool office with this application, or separately if this application is submitted by email.

*We understand completed applications include this application sheet, the submission of an application processing fee, and a small group session. Only completed applications will be considered for admission.*

*We hereby apply for admission to Hollingworth Preschool on behalf of our child. We have enclosed a check for \$50.00 made payable to **Teachers College** to cover the cost of processing the application. We attest that all of the information on this form is true to the best of our knowledge. We are aware of, and agree to abide by, the fact that students are chosen for Hollingworth Preschool by the admissions committee on the basis of professional interpretation of the information gathered during the application process in light of the curriculum of the Preschool. Please note: **All Checks must be made payable to Teachers College.***

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date