

Ottawa Opportunity School

114 East Jefferson Street
Ottawa, IL 61350
(815) 433-2731

**EXPLORING OPPORTUNITY SCHOOL
An Introduction to Preschool for Toddlers
Application Form**

Full Name of Child _____ **Gender** _____

Preferred Name/Nickname _____ **Birthdate - Month/Day/Yr.** _____

Street Address _____ **City** _____ **Zip Code** _____ **Phone** _____

Parent/Guardian (Print Name) _____

Email Address: _____

Name of Adult(s) who will attend with child _____

Class Times

**(Please indicate the class you would like by placing a 1, 2 or 3 beside the class time preferred.
(1 being the most desired and 3 being least desired)
*Times of classes are subject to change based on enrollment***

_____ **Thursday Evening (5:45 - 7:00)**

_____ **Friday Morning I (8:45 - 10:00)**

_____ **Friday Morning II (10:15 - 11:30)**

\$ 40.00 Registration/supply fee (non-refundable)

_____ **Check#** _____

_____ **Cash**

- ❖ Ottawa Opportunity School admits students of any sex, age, color, creed, national and ethnic origin to all the rights and privileges, programs and activities, generally accorded or made available to students at the school. It does not discriminate in its administration or admission policies or scholarship program or any other school administered programs.

SEE REVERSE SIDE FOR OUR FACEBOOK POLICY

Opportunity School Confidential Information Form

Name of Child _____ Gender: Male/Female

Date of Birth _____
 month day year

Father's Name _____

Phone Number: Home/Cell _____ Work _____

Address (if different from student) _____

Mother's Name _____

Phone Number: Home/Cell _____ Work _____

Address (if different from student) _____

Doctor _____ Address _____

Phone Number: _____

Did your child have any medical or developmental problems in his/her first years of life? Yes / No

If yes, please explain.

Does your child have asthma or allergies? Yes / No

If yes, please explain.

Do you have any concerns about your child's development? Yes / No

If yes, please explain.

Does your child have any special needs? Yes / No

If yes, please explain

Opportunity School would like to use **Facebook** to communicate with parents.

No child will be identified in any photograph by Opportunity School. Pictures may show school activities, field trips, events and parties. Classes may be identified (Example: Mrs. Hardt and Ms. Sarah's class) We plan to use photos of artwork, class projects, etc. Photos will be posted after events have taken place. **Opportunity School will NOT post any personal information about your child or your child's location at any given time.**

_____ Yes, I give Opportunity School permission to use my child's photographs and class work on Facebook.

_____ No, I do NOT want my child included on Facebook.

Child's Name: _____

Parent/Guardian _____ Date: _____