

Office use Only

Student #

Date Created

Stockdale Christian Preschool
4901 California Ave
Bakersfield, CA 93309
(661) 327-2227

Student Application of Enrollment

Date of Application _____

Child's Full Name _____
(Last) (First) (MI)

Name child goes by if different from above: _____

Address _____
(Street) (City) (Zip)

Home Phone () _____ Cell () _____

Primary Email _____

Birth Date _____ Age _____ Gender _____

Is your child potty trained? Yes ___ No ___

Desired days of attendance: 5Full ___ 5Half ___ 3Full ___ 3Half ___ 2Full ___ 2Half ___

Enrollment needed for: Fall _____ Summer _____ ASAP _____
(Year) (Year)

Parent/Guardian #1

Mr./Mrs./ Ms. Name _____

Address _____
(Street) (City) (Zip)

Home Phone () _____ Cell () _____

Primary Email _____ (Please print clearly)

Relationship to Student _____ Lives with Student? Yes ___ No ___

Employer/Occupation _____

Work Phone () _____ Billing party? Yes ___ No ___

Parent/Guardian #2

Mr./Mrs./ Ms. Name _____

Address _____
(Street) (City) (Zip)

Home Phone () _____ Cell () _____

Primary Email _____ (Please print clearly)

Relationship to Student _____ Lives with Student? Yes ___ No ___

Employer/Occupation _____

Work Phone () _____ Billing party? Yes ___ No ___

Siblings that currently attend SCS (List names and grades):

How did you hear about Stockdale Christian Preschool?

If your family currently attends a church, please give the church name, pastor, and how long you have attended:

Do you attend Bakersfield First Assembly of God? Yes ___ No ___

If yes, are you a church member? Yes ___ No ___

Personal Testimony

Father: _____

Mother: _____

Has your child attended/currently attending an early education center? Yes ___ No ___

If yes, where? _____

Does your child have physical conditions we should be aware of? Yes ___ No ___

If yes, please explain: _____

Does your child have any food/other allergies we should be aware of? Yes ___ No ___

If yes, please explain in full detail: _____

Please list any other information which you feel would be helpful to know before your child is admitted: _____
