



Preschool Waitlist Application

Dear Parent:

While we believe that your child's preschool experience will be an excellent preparation for kindergarten, we also want to remind you that your child is a role model for our children with multiple disabilities. As your child enjoys positive exposure and experiences with children who have disabilities, our students, too, have the enriching experience of observing positive behaviors and appropriately developing skills from your child.

Children are placed from a waitlist based upon availability of openings. Preschoolers with typical development are comprised of children from our Early Intervention program, children of staff, and children from the community.

We currently have nine full-day classes at the school. All programs operate Monday through Friday during the school year. There is a charge of \$200.00 per month starting the 2024-2025 school year.

Again, thank you for your interest. Sincerely,

Michelle Ocilka-Yeckle
Principal

Shannon Shelton
Assistant Principal

Fairhaven TCBDD Preschool Vision Statement

*The TCBDD Fairhaven Preschool program's vision is to help provide positive experiences that **supports** children and families, **encourages** growth and development to become independent, and **helps** children reach their full potential.*

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Fairhaven Guidelines for Preschoolers Who Are Placed as Tuition Pay Role Models

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Eligibility

We are delighted that you have chosen to have your child experience preschool at Fairhaven School. Our only criterion is that your child be age three by August 3rd of the upcoming school year.

You will be notified when a space for your child has opened up. You will also be expected to attend a mandatory enrollment meeting for your child.

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We realize that all children grow and learn at a different pace. Our expectations are not unrealistic for children who may be participating in a preschool experience with other children for the first time. Our expectations and guidelines serve the purpose of preserving the importance of the role that your child provides as we educate and support our children with disabilities. We reserve the right to make the final determination of whether your child is an inappropriate distraction for the preschool class. We look forward to a joint commitment with you to make this a success.

The following concerns could result in removal of your child from the program:

Giving you and your child time to adjust to the new routine, schedule, and demands of a structured preschool day may take a few weeks; however, **we would expect that separation from you and a smooth transition would be successful by the first full week of October.**

Again, we realize that each child develops differently so we cannot expect toileting to be any different. We would expect that you and your three year old be working on potty training at home in preparation for preschool. **We would also expect that your child be completely toilet trained by age four**, perhaps only needing help with fasteners and/or hygiene help.

Learning to play, share, and interact with others can be a challenge for all children, so we are prepared for the natural scuffles and resistance; however, if these behaviors become excessive or if your child becomes a distraction and/or danger to the others, specifically to those we serve with disabilities, **then we may ask you to remove your child if we cannot resolve the behavior.**

Typically Developing Preschooler Waitlist Form

Thank you for your interest in Fairhaven's Preschool Program!

Please:

- Read the enrollment guidelines
- Complete the waitlist application
- Return this form to the school

If your address and/or phone number change during your period on the waitlist, it is your responsibility to inform us.

If our efforts to contact you fail due to nonworking or old phone numbers, we will move onto the next child on the waitlist.

You must provide transportation to participate in our preschool program.

CHILD'S NAME: _____

DATE OF BIRTH: _____ GENDER (CIRCLE ONE): BOY GIRL

PARENTS: _____

ADDRESS: _____

PHONE: _____

ALT PHONE: _____

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I am a TCBDD employee.

Work Location: _____

TO BE COMPLETED BY SCHOOL ONLY:

Date Received: _____ By (initials): _____