



LINTON HALL SCHOOL

9535 Linton Hall Road, Bristow, Virginia 20136

Preschool 571-428-2565 ~ littlesprouts@lintonhall.edu ~ www.lintonhall.edu

OFFICE USE ONLY

RECEIVED	
ACCEPTED	
ADMITTED	
GRADUATED	
WITHDRAWN	

PLEASE COMPLETE ONE FORM (ALL SPACES MUST BE COMPLETELY FILLED OUT) PER CHILD AND SUBMIT COMPLETED FORM & \$100 NON-REFUNDABLE RE-ENROLLMENT FEE ONLINE (SEE EMAIL OR WEBSITE) OR TO DROP OFF/MAIL TO OUR MAIN OFFICE

STUDENT'S NAME _____

(LAST)

(FIRST)

(MIDDLE)

(MALE OR FEMALE)

(NICKNAME)

STUDENT'S DATE OF BIRTH _____ AGE AS OF 9/30/2021: ____YEARS ____MONTHS

RELIGION OF STUDENT: _____ BAPTIZED: YES NO N/A HOME PARISH: _____

FAMILY IS ALUMNI OF LHS AND/OR LHS LITTLE SPROUTS : _____; WHEN: _____ PREVIOUSLY ATTENDED A LHS CAMP OR ENRICHMENT CLASS: _____

____ 2 DAY PRESCHOOL (2Y TO 3Y), 9:00AM—1:00PM, \$2980 PER YEAR (POTTY TRAINING NOT REQUIRED)

____ 3 DAY PRESCHOOL (3Y TO 4Y), 9:00AM—1:00PM, \$3400 PER YEAR (MUST BE POTTY TRAINED)

____ 5 DAY PRE-KINDERGARTEN (4Y TO 5Y), 9:00AM—1:00PM, \$4400 PER YEAR (MUST BE POTTY TRAINED)

____ 5 DAY PRE-KINDERGARTEN BRIDGE (4Y TO 5Y), 9:00AM—1:45PM, \$5400 PER YEAR (MUST BE POTTY TRAINED)

____ EXTENDED DAY ENRICHMENT PROGRAM (BEFORE & AFTER SCHOOL) MORNING—7:00AM TO 9:00AM & AFTERNOON—CLASS DISMISSAL TIME TO 6:00PM, \$8.50 PER HOUR FOR SCHEDULED CARE

PARENT OR GUARDIAN(S) _____

(PLEASE INDICATE MR., MRS., MS., ETC.)

RESIDENTIAL ADDRESS:

 STREET AND NUMBER CITY STATE ZIP CODE

PRIMARY TELEPHONE _____ PRIMARY EMAIL _____

CELL PHONE (M) _____ E MAIL ADDRESS (M) _____

CELL PHONE (F) _____ E MAIL ADDRESS (F) _____

~PARENT CONTACT INFORMATION~

FATHER

NAME _____
 FAITH _____
 OCCUPATION _____
 FIRM NAME _____
 BUSINESS TELEPHONE _____
 ACTIVE DUTY MILITARY? _____

MOTHER

NAME _____
 FAITH _____
 OCCUPATION _____
 FIRM NAME _____
 BUSINESS TELEPHONE _____
 ACTIVE DUTY MILITARY? _____

FAMILY MEMBERS WHO LIVE IN THE HOME	RELATIONSHIP	DATE OF BIRTH

ACADEMIC HISTORY

SCHOOL LAST ATTENDED _____ YEAR _____
 ADDRESS _____
 CITY/STATE/ZIP _____
 N/A _____ CHILD HAS NOT PREVIOUSLY ATTENDED SCHOOL.

*IF APPLICANT HAS PREVIOUSLY ATTENDED SCHOOL, PLEASE SEND IN A CONFIDENTIAL RECOMMENDATION FORM COMPLETED BY THE PREVIOUS SCHOOL.

AGREEMENT OF CONSENT

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS DOCUMENT IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. IF ACCEPTED, I AGREE TO ABIDE BY ALL LINTON HALL SCHOOL POLICIES AND PROCEDURES AND TO BE FULLY INVOLVED IN THE SCHOOL COMMUNITY.

PARENT/GUARDIAN SIGNATURE _____ DATE _____
 PARENT/GUARDIAN SIGNATURE _____ DATE _____

~LINTON HALL SCHOOL PROGRAMS~

- HOW DID YOU HEAR ABOUT LINTON HALL SCHOOL'S LITTLE SPROUTS PRESCHOOL?

FRIEND (WHO?)_____ WEBSITE_____ FACEBOOK_____ EVENT (WHICH?)_____ ADVERTISEMENT (WHERE?)_____ OTHER_____

- I AM INTERESTED IN LEARNING MORE ABOUT THE FOLLOWING PROGRAMS IN THE FUTURE AT LINTON HALL SCHOOL:

KINDERGARTEN _____ LOWER SCHOOL (1ST-4TH GRADES) _____ UPPER SCHOOL (5TH-8TH GRADES)_____

- AS A LINTON HALL SCHOOL'S LITTLE SPROUTS PRESCHOOL PARENT, I WOULD LIKE TO VOLUNTEER AS AN ASSISTANT IN MY CHILD'S CLASSROOM AND HAVE COMPLETED OR WILL COMPLETE THE REQUIRED VIRTUS TRAINING. I AM AVAILABLE:

PARENT NAME_____ DAYS AVAILABLE: M T W TH F CONTACT INFORMATION_____

~APPLICATION CHECKLIST~

_____ COMPLETED APPLICATION – SUBMITTED VIA UPLOADING DOCUMENT ONLINE (SEE EMAIL OR WEBSITE) OR DROPPED OFF/MAILED TO MAIN OFFICE

_____ APPLICATION FEE \$100 – NON-REFUNDABLE; SUBMITTED VIA ONLINE (SEE EMAIL OR WEBSITE) OR DROPPED OFF/MAILED TO MAIN OFFICE, PAYABLE TO LHS

_____ COMPLETED TEACHER INFORMATION FORM

_____ COMMONWEALTH OF VIRGINIA SCHOOL ENTRANCE HEALTH FORM FOR THE CALENDAR YEAR (MUST BE SUBMITTED PRIOR TO ADMISSION)

_____ ORIGINAL BIRTH CERTIFICATE (PRESENTED FOR VERIFICATION ONLY – MUST BE SUBMITTED PRIOR TO ADMISSION)

_____ PROGRESS REPORTS AND/OR STANDARDIZED TEST SCORES (ONLY FOR NEW STUDENTS WHO PREVIOUSLY ATTENDED SCHOOL)

_____ COMPLETED CONFIDENTIAL RECOMMENDATION FORM (ONLY FOR NEW STUDENTS WHO PREVIOUSLY ATTENDED SCHOOL)

_____ PROOF OF CUSTODY (IF APPLICABLE)

~ACCEPTANCE NOTIFICATIONS~

- LINTON HALL SCHOOL RESERVES THE RIGHT TO REQUEST A READINESS ASSESSMENT OF CHILDREN ENTERING THE PRE-K PROGRAM.
- PRIORITY IS GIVEN TO REGISTERED LINTON HALL SCHOOL FAMILIES AND TO SIBLINGS OF STUDENTS ALREADY ENROLLED IN THE SCHOOL.
- APPLICATIONS ARE NOT CARRIED OVER FROM THE PREVIOUS YEAR. PRIORITY REGISTRATION IS GIVEN TO WAIT LIST FAMILIES WHO CHOOSE TO RE-APPLY THE NEXT SCHOOL YEAR.
- UPON ACCEPTANCE A NON-REFUNDABLE DEPOSIT OF ONE MONTH'S TUITION AND SIGNED ENROLLMENT AGREEMENT ARE DUE. ONCE THAT DEPOSIT IS RECEIVED, THE STUDENT'S PLACE IS HELD IN LINTON HALL SCHOOL'S LITTLE SPROUTS PRESCHOOL.
- LINTON HALL SCHOOL DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL OR ETHNIC ORIGIN, ANCESTRY, SEX, MENTAL OR PHYSICAL DISABILITY, OR ANY OTHER STATUS PROTECTED BY LAW.

~LINTON HALL SCHOOL'S LITTLE SPROUTS PRESCHOOL~

ADDITIONAL INFORMATION I'D LIKE TO SHARE: