

**HOWELL TOWNSHIP BOARD OF EDUCATION
Pupil Services Department**

INTEGRATED PRESCHOOL APPLICATION

***This form must be mailed to the Howell Township Public Schools' Administrative Office,
Post Office Box 579, Attention: Mary Kinzel no later than
Wednesday, April 26, 2017***

Student's Name (last, first, middle initial) _____

Date of Birth (month, day, year) _____
(Student must be 3 years old by October 1, 2017 but not 5 years old)

Male _____ Female _____

Parent/Guardian Name(s) _____

Parent/Guardian Home Address _____

Home/Business/Cell Phone Number(s) **(H)** _____ **(B)** _____

(Cell) _____

Email Address _____

Emergency Contact Information:

Name _____ Relationship _____

Home Address _____

Home Phone _____

Business Phone _____

Cell Phone _____

Is English the primary language in your home? Yes _____ No _____

Do you believe your child may have special needs, such as speech and language therapy needs?

Yes _____ No _____

If yes, please describe. _____

Parent/Guardian Signature _____ Date _____

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INTEGRATED PRESCHOOL PROGRAM
2017-2018

- ❖ *Mail this application to the Howell Township Public Schools' Administrative Office, Post Office Box 579, Attention: Mary Kinzel no later than Wednesday, April 26, 2017.*

- ❖ *Lottery Drawing: Friday, May 5, 2017 at 2:30 P.M. at Howell Township **Middle School North**.*

- ❖ *Written Notification: Sent Friday, May 12, 2017.*

- ❖ *Applicants must be flexible regarding A.M./P.M. placement. A schedule for tuition payments will be provided to those eligible for enrollment.*

- ❖ *Transportation may be available for a fee; otherwise parents will be responsible for transporting their child/children to and from the program.*

- ❖ *If your child is offered placement, you can complete online registration from any computer/device with internet access. After providing your child's information you will be asked to select an appointment time for the in-person verification session which will take place at the district's Central Registration Office. During the in-person verification session, you will need to present the following required documents:*
 - *Student's original birth certificate with raised seal*
 - *2 proofs of residency*
 - *Completed residency affidavit*
 - *Student's current physical exam and immunization record. Please note that the physical must be completed on the Howell Township Health Form which can be found on our website*
 - *Tuition deposit of \$250.00 (check or money order only, made payable to H.T.B.O.E.)*

- ❖ *Further details and directions for the full registration process can be found on the Howell Township Public Schools' website: <https://www.registration.howell.k12.nj.us>. If you have any additional questions about the registration process, please call the Central Registration Office at 732-751-2580 x3860.*