

**The Language Workshop For Children. Language Immersion Preschool  
APPLICATION . 2010-11 SCHOOL YEAR. ALL LOCATIONS**

Child's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Gender \_\_\_\_\_ Birth Date \_\_\_\_\_ Exact Age 09/10 \_\_\_\_\_

**PLEASE COMPLETE A SEPARATE FORM FOR EACH CHILD**

Parent Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Business/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Business/Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Street Address / Apt \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_ **PLEASE BE VERY CLEAR. WE NEED YOUR EMAIL ADDRESS FOR NOTIFICATIONS.**

**PLEASE FAX OR MAIL THIS FORM WITH A \$50 APPLICATION FEE  
ONLY TO THE LWFC OFFICE BELOW:**

The Language Workshop for Children, 888 Lexington Ave., New York 10065 • (F) 212/396-1372

PROGRAM	LOCATION	LANGUAGE 1	# DAY(S)	DAY(S)	SESSION
[X] Language Immersion Preschool	[ ] NYC Main (East 66 <sup>th</sup> )	[ ] Spanish	[ ] 1-Day	[ ] Monday	[ ] Full School Year
	[ ] Montclair	[ ] French	[ ] 2-Days	[ ] Tuesday	Half School Year
	[ ] Madison	[ ] Italian	[ ] 3-Days	[ ] Wednesday	[ ] Sept-Jan
	[ ] Manhasset	[ ] Chinese		[ ] Thursday	[ ] Jan-Jun
				[ ] Friday	
	LOCATION	LANGUAGE 2	# DAY(S)	DAY(S)	
	[ ] NYC Main (East 66 <sup>th</sup> )	[ ] Spanish	[ ] 1-Day	[ ] Monday	[ ] School Year
	[ ] Montclair	[ ] French	[ ] 2-Days	[ ] Tuesday	Half School Year
	[ ] Madison	[ ] Italian	[ ] 3-Days	[ ] Wednesday	[ ] Sept-Jan
	[ ] Manhasset	[ ] Chinese		[ ] Thursday	[ ] Jan-Jun
				[ ] Friday	

Check One:

- [ ] Please find a check payable to The Language Workshop for Children in the amount of \$50,  
[ ] Please charge my \$50 application fee to the card below:

Cardholder Name \_\_\_\_\_ Billing Zip Code \_\_\_\_\_ Today's Date \_\_\_\_\_

Card Number \_\_\_\_\_ Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_

- (1) Has your child participated in the LWFC's ***French for Tots, Spanish for Tots, Italian for Tots*** or ***Chinese for Tots***? [ ] Yes [ ] No  
If no, do you plan to enroll your child at the LWFC before September, 2010? [ ] Yes [ ] No  
If yes, at what age did your child start? \_\_\_\_\_ How many sessions has he or she completed? \_\_\_\_\_
- (2) Has your child participated in another language immersion toddler program? [ ] Yes [ ] No  
If yes, please specify language and program name \_\_\_\_\_  
At what age did your child start? \_\_\_\_\_ How many sessions did he or she complete? \_\_\_\_\_
- (3) Is English your child's first language? [ ] Yes [ ] No  
If no, what is your child's first language? \_\_\_\_\_

(continue on next page)

(4) In what other program(s) has your child participated? Starting at what age? Was your child enthusiastic about them? Was he reluctant? Please describe his experience(s).

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(5) What are your child's strengths?

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(6) What are your child's weaknesses or sensitivities?

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(7) Will your child need medication administered at the LWFC preschool?  Yes  No

If yes, please specify and detail \_\_\_\_\_

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(8) Does your child have allergies that could affect him at the LWFC preschool?  Yes  No

If yes, please specify and detail \_\_\_\_\_

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(9) Does your child have other physical, emotional, psychological, or developmental concerns that could affect him at the LWFC preschool?  Yes  No

If Yes, please specify and detail \_\_\_\_\_

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(11) Is there anything else that tells us about your child's readiness to participate in a language immersion preschool?

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