



**MILE SQUARE EARLY LEARNING CENTER
301 Garden Street, Hoboken, NJ 07030**

PRESCHOOL TRANSITION PROGRAM APPLICATION

Child Information

First Name: _____ **Last Name:** _____

Birth Date: _____ Child's Gender: Female Male

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Email: _____

Email Address: _____

Parent/Guardian Information

Parent's Name _____ Parent's Name: _____

Phone #: _____ Phone #: _____

Bus. #: _____ Bus #: _____

Email: _____ Email #: _____

Is your child potty trained? Yes No

Are there other children in your household? How many? Boys: _____ Girls: _____

- My child will be attending 10 months (September-June)
- My child will be attending 12 months (September-August)
- I need services for this Summer 2021

Please select hours needed:

X	Time	Monthly Fee	Select Hours
	7:30-8:30	\$140.00	
	8:30-3:00	\$1,170.00	
	3:00-4:00	140.00	
	4:00-6:00	\$280.00	

We accept Urban League Vouchers for eligible families. Please inquire for more information.

Desired Enrollment Date: _____

Parent/Guardian Name _____ Date: _____