



**Child Temperament**

\_\_\_\_\_  
Please describe your child: shy, forward, aggressive, talks often, slow to warm, an observer etc...

\_\_\_\_\_  
Please describe your child: plays with any children, a few select friends or loves to play alone.

\_\_\_\_\_  
Please describe your child's fears: afraid of the dark, storms, loud noises, many changes etc...

\_\_\_\_\_  
Please describe your child: loves to dance, sing, build things for long periods of time, swim, read books

**Routine and Schedule**

\_\_\_\_\_  
What time is bed?

\_\_\_\_\_  
Is it consistent?

\_\_\_\_\_  
What time does your child wake?

\_\_\_\_\_  
Describe the first 30 minutes of morning routine and the last 30 minutes before bed?  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Does your child nap? Yes or No

\_\_\_\_\_  
What time is the nap?

\_\_\_\_\_  
How long is the nap?

\_\_\_\_\_  
How often does your child have BM (2x a day, once a day)?

\_\_\_\_\_  
Is your child able to wipe his/her butt?

\_\_\_\_\_  
Is your child able to use the toilet by him/her self?

\_\_\_\_\_  
Pull up underpants and shorts?

\_\_\_\_\_  
Zip or button?

\_\_\_\_\_  
Please give us any advice about your child to better connect us with his or her emotional needs.

\_\_\_\_\_  
Any other information about your child (knows all colors, counts to x numbers can name abc' or sounds?)

***Please feel free to attach a note.***

To the best of my knowledge the above information is accurate and true. I hereby request that my child be considered for enrollment to Ewa Plains Enrichment Programs llc - Literacy Preschool.

\_\_\_\_\_  
Signature of Father/Guardian's First and Last Name

\_\_\_\_\_  
Print First and Last Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Mother/Guardian's First and Last Name

\_\_\_\_\_  
Print First and Last Name

\_\_\_\_\_  
Date

**Official Use Do not write below this space unless EPEP Administration**

School Tour Date: \_\_\_\_\_  
Employee Name: \_\_\_\_\_  
Form 14 \_\_\_ TB \_\_\_  
ER card \_\_\_ Consent \_\_\_  
App \$20 \_\_\_ Comp \$180 \_\_\_  
\$300 deposit \_\_\_\_\_  
Payment Due Dates:  
\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_/\_\_\_  
Promise Note Date: \_\_\_\_\_

**Contact with Family**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ewa Plains Enrichment Programs llc \* Ewa Plains Literacy Preschool**

Address: 91-660 Pohakupuna Road, Ewa Beach, HI 96076 Phone: 220-3210 Map Directions:

[www.EwaSchools.com](http://www.EwaSchools.com)

**Application and \$20 Fee**

If you are transferring from another preschool, we can waive your comprehensive fee.

The application has questions that can often lead to misunderstandings or poor quality of care if not addressed at the onset. The questions are not meant to weed out or deny service. It is to bring clarity and quality to the school and children in care. Please complete all of the lines and have both family members signed.

**Discounts and Financial**

Form-14, current TB, ER card, checks for deposit and tuition must be received and dated.

Financial aid and discounts are given to those applications, which have completed all of the required paperwork and turned in checks (can post date) to secure enrollment. All other scholarships require the first month tuition to be paid in advance and will be refunded to you, when the grant is paid to the school (usually within 60 days from the grantors).

**Scholarship Award Letter**

You must bring the preschool a copy of the award letter AND mail it back by the deadline for the scholarship.

If you obtain a scholarship, you must make a copy of the award letter and email it to [info@EwaSchools.com](mailto:info@EwaSchools.com) or bring it in. We cannot add your child to the award acceptance list until we have this form. Please **bring the award letter** as soon as you get it. This is regardless of the other paperwork or fees that are due. We have a five days window to respond to scholarship grantors.

Then you must sign the acceptance form and send it to scholarship source within five days. The Grantors are bound by strict rules recipients must comply to meet scholarship deadlines. **Acceptance letters go out by August 1<sup>st</sup>** (call the scholarship office for prerecorded information).

Legal Documents  
Forms  
Agreements  
Required By Law  
in the State of Hawaii

In addition to the application, all children are required by law to have this information filed with the school BEFORE the start date:

- Emergency card, Authorized pickup list.
- Form -14 from your child's doctor  
(*current physical, all shots and TB clearance*)
- TB Clearance- free test at Waipahu Civic Center
- Consent forms for treatment and care.
- Contract to stay the full year to obtain discounts

Fees  
and  
Payments

\$20 non-refundable application fee to be submitted with the application.  
\$180 non-refundable comprehensive fee for instructional materials, unless you are paying for half the years tuition or full year –then it is only \$ 90.00  
\$300 refundable deposit (if you stay for the full year) to be returned upon a 0.00 balance due to the school.

Fieldtrip \* Uniforms \* Fundraisers \*First Day Supply List are additional, see policies.