



Foundations Preschool of Washtenaw County

Welcome to Foundations Preschool!

Foundations Preschool offers tuition based childcare and preschool. We also offer The Great Start Readiness Program (GSRP), a free pre-K program. Families must first apply for GSRP through the county's website. You can find step-by-step instructions here: <https://www.foundations-preschool.org/gsrp/>

Families may be eligible for our in-house scholarship (based on the sliding scale). We accept both DHHS (Department of Health and Human Service) and CCN (Child Care Network) scholarships, Veterans, Universities, etc.

Forms to be submitted with the application:

1. Proof of age for child (birth certificate, verification of birth from hospital, passport).
2. Proof of income for the household: current pay stubs; 3 for full time; 6 for part-time or Tax 1040 form, W2 or letter from employer. Include any child support, alimony, scholarships or grants. (Proof of income will help us determine your tuition rate.)
3. Contract agreements with DHHS/CDC or ChildCare Network if applicable.

Before enrollment can be finalized and a start date assigned, the following needs to be completed:

1. Health appraisal/annual physical on file
2. Updated immunization records on file
3. Foundation Preschool enrollment forms (will be provided at enrollment meeting) completed
4. Classroom visit

**If applicable, forms for the following must be completed:
Food allergies, medical conditions, medication needed and action plans.
Proof of DHHS/CDC and/or ChildCare Network scholarships*

The child's first day will be no less than 5 school days after all required paperwork has been received and reviewed by the office staff. This allows teachers and staff time to prepare and welcome your child properly.



Instructions

Complete this form and send it to: enroll@foundations-preschool.org
Or scan the QR code to enroll online!

3770 Packard Rd, Ann Arbor, MI 48108 | Phone: 734-677-8130 | Fax: 734-677-0280
info@foundations-preschool.org | Hours: Monday-Friday 7:00am - 6:00pm

Requested Start Date:

Family Information

Child's Name

Birthdate

Assigned gender at birth*

Male

Female

*for reporting purposes only

Ethnicity*

Hispanic

Am. Indian/Alaskan Native

Arab/Middle Eastern

Asian/Asian American

Black/African American

Native Hawaiian/Pacific Islander

White/Caucasian

Other:

Language(s) spoken at home

Parent/Guardian's Name

Address

Primary Phone

Email Address

Parent/Guardian's Name

Address (if different)

Primary Phone

Email Address

Program Enrollment

All programs are full day/full week unless indicated. Select a program based on the child's age at time of enrollment. Tuition is charged weekly.

Infant/Toddler (6 weeks - 15 months)	\$430/full week	\$290 M/W/F	\$200 T/Th
Toddler (15 months - 33 months)	\$430/full week	\$290 M/W/F	\$200 T/Th
Lower Preschool (30 - 40 months)	\$385/full week		
Upper Preschool (3 - 4 years)	\$340/full week		
Pre-Kindergarten (4 - 5 years)	\$0 GSRP Pre-K - All children qualify.		

More information at: <https://wwwFOUNDATIONS-preschool.org/gsrp/>

Household Information

How many people (children and adults) live in the household and are supported by the family's income.

Number of adults

Number of children

Estimated total monthly family income

Number of adults working

Family Questionnaire

Answering these questions will help teachers prepare for your child.

Has the child been in daycare before? Yes No

If yes, where?

If yes, why did they leave?

Is the child able to indicate when they need to use the bathroom? Yes No

If No, is your child in diapers or pull-ups? Diapers Pull-ups

Does your child have food allergies or food restrictions? Yes No

If yes, please list.

Does your child have any medical conditions we need to be aware of? Yes No

If yes, what?

Any concerns with the child's development (speech, movement, eating) or behavior?

Yes No If yes, what are
your concerns?

Has the child had their vision and hearing checked? Yes No

If yes, when?

Any concerns?

Has the child been seen for Early Intervention Services? Yes No

If yes, from where
and when?

Does the child have an IEP or IFSP? Yes No

If yes, from where?

Are there any restrictions on play or activities for your child? Yes No

If yes, please list.

What is the child's temperament (shy, outgoing, demanding, helpful, kind...)

What are the child's favorite activities?

Are there behavior triggers for them you'd like to share? (loud noise, crowded spaces, darkness, not getting what they want...)

Anything else you like to share with us?

Form Submission

All the information I have provided is, to the best of my knowledge, true and correct.

Signature

Date