

# Scholarship Application

(Confidential)

Name of Child: \_\_\_\_\_

Male

Female

Birthdate: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Marital Status:

Father's name: \_\_\_\_\_

Married

Single

Address: \_\_\_\_\_

Separated

Divorced

\_\_\_\_\_

Phone Number: \_\_\_\_\_

(If there is no phone, leave a number where you can be reached.)

Other Children(s) Name

Birthdate

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Pediatrician: \_\_\_\_\_

Phone: \_\_\_\_\_

Social Worker: \_\_\_\_\_

Phone: \_\_\_\_\_

Employment:

Father: \_\_\_\_\_

Phone: \_\_\_\_\_

Mother: \_\_\_\_\_

Phone: \_\_\_\_\_

Is there someone in the community who knows you and/or our child that we may contact to get to know you better?

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

How did you find out about the WRNS scholarship program?

\_\_\_\_\_

\_\_\_\_\_

Has your child been involved in a regularly scheduled group before?

Yes

No

If yes, please describe: \_\_\_\_\_

Does your child have frequent playmates?

Yes

No

What are some of his/her favorite things to do? \_\_\_\_\_

Does your child have and physical or emotional problems that you know of? Yes No

If yes, please describe: \_\_\_\_\_

What do you hope your child will gain from the nursery school experience?

It is necessary for you to provide transportation to and from school for your child. Would that be a problem for you? Yes No

Please supply the following information, as well as a copy of your most recent Income Tax Form (applications will not be considered complete with out ALL requested information).

Income \$ \_\_\_\_\_

(Gross \_\_\_\_\_ Net \_\_\_\_\_ Monthly \_\_\_\_\_ Yearly \_\_\_\_\_)

Expenses:

Mortgage \_\_\_\_\_ Food \_\_\_\_\_ Phone \_\_\_\_\_

Rent \_\_\_\_\_ Car \_\_\_\_\_ Medical \_\_\_\_\_

RG&E \_\_\_\_\_ Gas \_\_\_\_\_ Insurance \_\_\_\_\_

Other \_\_\_\_\_

Please add any additional information that you think will be helpful. If additional space is needed, please attach pages.

Before returning to Winton Road Nursery School, please be sure to include the following:

- This Scholarship Application
- A copy of your 2008 Income Tax Form
- A copy of Winton Road Nursery School application or registration contract

*I verify that the above information is true and complete.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return all forms by April 15th to:

Lisa Weld  
24 Chelmsford Road  
Rochester, NY 14618