



Bean Sprout Early Childhood

Application for Enrollment 2012-2013

Child's Name: _____ Birth date: _____

Contact Information

Parent Names: _____

Home Address: _____

Home Phone: _____

Other Phone: _____

Email Address: _____

Brothers and Sisters (names and ages):

Please list any allergies or food sensitivities:

Background Questions

Has your child had any previous preschool or daycare experience? If so, please include where, your child's age when attending and also your reason for leaving.

What are you looking for in having your child attend this program?

Do you have an familiarity with Waldorf education? Please explain.

Are you interested in learning more about Waldorf education? Yes No

How did you hear about Bean Sprout Early Childhood?

Please return this form with a non-refundable \$50 application fee. Make checks payable to Bean Sprout Early Childhood.

Bean Sprout Early Childhood
1058 33rd St
Des Moines, IA 50311

After reviewing you application I would like to set up a time for an interview. I will be in touch soon. Thanks! I look forward to getting to know you better!

Susan