

Vernon Public Schools
Kindergarten Registration
Early Childhood Experience Questionnaire

Child's name _____

Please check any box(s) that best describes your child's preschool experience.

- Academy of Art and Learning
- Apple Tree Learning Center
- Community Nursery School of Talcottville
- Extended Family (aunt, uncle, grandparent etc.)
- Grove Street Corner Preschool
- Hockanum Valley Child Day Care Center
- Indian Valley YMCA
- Kids Academy Child Care Center
- Licensed Family (Home) Child Care
- My child was cared for by either or both parents within the home
- Rockville High School Nursery School
- St. Bernard Preschool
- St. Joseph School
- Trinity Cooperative Preschool
- Vernon Public Schools/Head Start Preschool Collaborative
- Other: _____

If your child attended a preschool program, how long did he/she attend?

6 months or
less

1 year

2 years or
more

Signature

Date