



**MODESTO JUNIOR COLLEGE
ME-WUK CHILD DEVELOPMENT LABORATORY &
FAMILY PARTICIPATION PRESCHOOL**

Application for Open Enrollment 2019-20

MJC Me-Wuk Child Development Laboratory & Family Participation Preschool is now accepting applications for children between the ages of 3 and 5 for the 2019-20 MJC academic year.



Summer 2019: June through July (M,Tu, W,)
Fall 2019: September through December (M, W)
Spring 2020: January through April (M, W)

- Children enrolling in the Me-Wuk Preschool must be **AT LEAST** 3 YEARS OLD
- Enrollment is based on first come first served for any age-eligible children
- IF ADMITTED: each semester your child is enrolled throughout the academic year (fall, spring, summer), one parent/guardian from each family is required to enroll in, attend, and successfully complete 3, two-hour parenting classes through MJC Community Education.

CLASS OFFERINGS

MORNING SESSION (Lab Practicum/Family Participation)

Monday and Wednesday mornings
9:00 AM – 12:00 PM

Cost: \$15.00 a day for each semester plus annual registration and parenting class fees.

Fees are due prior to the start of each semester and are broken down into 2 monthly payments.



Families applying to the program are strongly encouraged to visit the program. Please call Sarah Ford, (209) 575-6329 or (209) 575-6357 (fords@mjc.edu) to arrange a time for your visit.

Visit www.mjc.edu/fcs **Early Care link** for additional information

**MAIL THIS PAGE TO: MJC Me-Wuk Child Development Laboratory & Family
Participation Preschool,
435 College Avenue, Modesto, CA 95350**

**or bring it to the Child Development Office, John Muir Room 157 on the West
Campus. Hours are Mon-Thurs., 8:00-5:00, Fri. 8:00-4:30**

**2019/2020 -- ME-WUK CHILD DEVELOPMENT LABORATORY & FAMILY
PARTICIPATION PRESCHOOL**

**Application for Open Enrollment for the following terms:
Summer 2019, Fall 2019, Spring 2020**

Child's First/Last Name: _____

Gender: _____ Birth date: _____

Child's Primary Address: _____ City & Zip: _____

Parent (1) Name: _____

Home Phone (1): _____ Work Phone (1): _____ Cell Phone (1): _____

Parent (2) Name: _____

Home Phone (2): _____ Work Phone (2): _____ Cell Phone (2): _____

Email address: _____

Permanent YCCD Employee? Yes No

Sibling previously enrolled in program? Yes No

Dates sibling(s) enrolled: _____

Did you submit an application last year (2017) for this same child? Yes No

How did you hear about this preschool program? _____

Referred by: _____

OFFICE USE ONLY:

Received _____ Confirmation Letter/Phone Call _____ Date Visited Program _____