

Hanover Township Public Schools

120 Reynolds Avenue
Whippany, NJ 07981

Gregory Margolis
Director of Special Education

Michael J. Wasko
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Telephone 973-515-2443
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Inclusive Preschool Program Application 2019-2020 School Year

STUDENT'S AGE-GROUP FOR SEPTEMBER 2019 (CHECK ONE)

3 YEARS-OLD

4 YEARS-OLD

PLEASE PRINT AND COMPLETE ALL QUESTIONS

Student's Full Name _____
Last First Middle

Date of Birth (Month/Day/Year) _____ Male Female

Parent(s)/Guardian(s) Information

Mother's/Guardian's Name _____

Father's/Guardian's Name _____

Home Address _____
Street Address

City, State, Zip Code

Home Telephone Number () _____

Mother's/Guardian's Work Telephone Number () _____

Cell Phone Number () _____

Father's/Guardian's Work Telephone Number () _____

Cell Phone Number () _____

Is English the primary language spoken in the home? YES

NO*

*If No, what other language(s) are spoken? _____

Is your child fluent in English and/or the other indicated language(s)? Please briefly explain: _____

By signing and submitting this application for my child, I am affirming that all of the information I have provided is truthful and accurate and that I understand and agree to the following requirements for my child’s enrollment in the preschool program:

- My child is a current resident of Hanover Township (Application must be submitted with a copy of the child’s birth certificate and 2 proofs of residency per the attached list. Upon enrollment, a completed medical history and proof of immunizations will also be required – **NOTE:** Proof of residency and the child’s birth certificate are *not required* for returning 4 year-old children)
- My child will be 3 or 4 years old on or before, October 1, 2019
- My child is fully toilet trained
- I understand that I am responsible for transporting my child to and from Bee Meadow School
- I understand that I am responsible for an annual tuition charge of \$3,100 paid in 10 monthly installments (Sept. 2019 – June 2020) of \$310.00 to: *Hanover Township Board of Education* by the 1st (first) of each month (61 Highland Avenue Whippany, NJ 07981)
- A \$100 non-refundable deposit, payable to: *Hanover Township Board of Education* must be included with this application to hold your child’s seat in the program. This amount will be deducted from the first month’s tuition payment.

Parent/Guardian Signature

Printed Parent/Guardian Name

Date

Application packets including the below materials must be returned to the Department of Special Services at Bee Meadow School *no later than February 22, 2019 at 3:00 pm.*

- Completed application
- Deposit check for \$100 made out to: *Hanover Township Board of Education*
- 2 proofs of residency – see the attached document

Office Use Only

Received on (Stamp):

Documents Received:

_____ Copy of birth certificate

_____ 2 proofs of residency

_____ \$100 deposit

Assigned Teacher _____

Verified by (Staff initials) _____

Hanover Township Public Schools

61 Highland Avenue
Whippany, NJ 07981

Michael J. Wasko
Superintendent of Schools

Telephone 973-515-2401
Fax 973-540-1023

Guidelines for Proving Residency Eligibility For Enrollment in School

In order to legally register your child as a student in the Hanover Township Public Schools, a minimum of 2 proofs of residency are required. The following lists include preferred documents for this process:

- Deed to property in names of parents/guardians
- Signed contract of sale of property to parents/guardians
- Signed lease/rental agreement to parents/guardians
- Most recent property tax bill to parents/guardians
- If both the child and the parent(s) are living with a Hanover Township resident, a signed and notarized Certification of Residency completed by the Hanover Township resident, available at the school office.
- If the child has been placed in Hanover Township by a Child Welfare Agency, a document from the agency showing that placement order

OR

If the child is living with a Hanover Township resident other than a parent:

- Affidavit Form A completed by the non-parent resident in Hanover Township.
AND
- Affidavit Form B completed by the parent(s) of the child.

Both forms are available at the School's Office, and must be returned as notarized copies.

III) Any three of the following items showing a Hanover Township address:

- Driver's license, registration or auto insurance card
- Current utility bill
- Current cable television bill
- Current credit card bill
- Written statement from a realtor stating that the parent/guardian has signed a rental or purchase contract in Hanover Township
- Mortgage statement
- Official mail: i.e., bank statement, government correspondence from the IRS or Social Security Administration
- Public assistance documents (AFDC, WIC)
- Income tax return
- Voter registration card or record
- Unemployment benefit verification
- Recent pay stub
- Documents supporting Affidavits A and B