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**Project Blossom**  
**Wrentham Public Schools' Preschool Program**  
120 Taunton Street  
Wrentham, MA 02093

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**Application for 4 year-olds for the 2021-2022 School Year**  
**\*Must be age 4 by 8/31/21\***

Date of Application:   Male  Female

Child's Name: \_\_\_\_\_  
First Middle Initial Last

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

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth:  Place of Birth (City/State): \_\_\_\_\_

Parent/Guardian Name/s: \_\_\_\_\_

Primary Language: \_\_\_\_\_

**Please number the sessions in the order of your preference. (1,2,3)**

Based on the number of applications received, a lottery may be held for specific sessions.

*Classes for 4 year-olds:*  My child currently attends Project Blossom Preschool

<p><b>3 days: Mondays, Wednesdays, and Fridays Morning</b></p> <p>Rank</p> <p><input type="checkbox"/> <b>Morning Session</b> 8:30 a.m. to 11:00 a.m. \$225.00 per month</p> <p><input type="checkbox"/> <b>Morning, Extended Session</b> 8:30 a.m. to 12:00 p.m. (no lunch) \$300.00 per month</p>
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<p><b>3 days: Mondays, Wednesdays, and Fridays Afternoon</b></p> <p>Rank</p> <p><input type="checkbox"/> <b>Afternoon Session</b> 12:00 p.m. to 2:30 p.m. \$225.00 per month</p>
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I have read the description of the application process and understand that completing this application does not guarantee my child's placement in this program and/or specific class session.

Signature:  Date:

By either typing or writing your name above you are agreeing to the statements made on this form.

For Office Staff Use Only

Session Offered: \_\_\_\_\_ Date of Offer:

Offer Accepted: \_\_\_\_\_ Offer Declined: \_\_\_\_\_