RIVER VALE SCHOOL DISTRICT

609 Westwood Ave • River Vale, NJ 07675 • 201.358.4000 • www.rivervaleschools.com

INTEGRATED PRE-SCHOOL APPLICATION

STUDENT NAME: _____
Last *First* *Middle*

Date of Birth: _____ / _____ / _____ **Gender:** ☐ Male ☐ Female
Month *Day* *Year*

(Child must be at least 3, but not 5 on 10/1 of applicable school year)

APPLICATION BEING SUBMITTED FOR:

☐ Current School Year ☐ Next School Year ☐ All Eligible Years

Preference: ☐ A.M. ☐ P.M. ☐ No Preference

PLEASE NOTE: *Parent preference will be considered, however, placements will be made based on availability.*

Parent/Guardian Name(s): _____

Parent/Guardian Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Parent/Guardian Signature: _____ Date: _____

Please submit application to: Ms. Joelle DeGaetano, Supervisor of Special Services
River Vale School District
609 Westwood Avenue, River Vale, NJ 07675
or
Email: NScicchitano@rivervaleschools.com

PLEASE NOTE: *An acknowledgement of applications received will be sent by email. If you do not receive an email confirmation within one week of submission, please contact the Child Student Team Office to follow up (201) 358-4011.*

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