



Columbus ISD Early Childhood Parent/District Agreement for Full Day Prekindergarten

Child's Legal Name (Please Print)

Date of Birth

Student ID/SS #

Parents/Guardians: Please complete this form in the school office as part of the enrollment procedure. The prekindergarten schedule will follow the Columbus ISD scholastic calendar. Residency in CISD, on an approved transfer application, is a requirement for participation in our prekindergarten program. By enrolling my child in the tuition supported Prekindergarten Program, I agree to the following:

1. My child's immunization requirements will be met by the first day of school attendance.
2. I will provide a change of *labeled* clothing (underwear, slacks, shirts, and socks) to be kept at school. I will also provide all necessary school supplies.
3. I will have my child potty-trained before the first day of school.
4. I will notify the school two days prior to withdrawing my child.
5. I agree to pay a total \$3,000 in ten installments of \$300. Installments are due the first of each month beginning August 1 through May 1. Please submit payment in person at the Columbus Elementary School office, 979-732-2078.

Note: On the sixth working day, a \$25 late fee will be assessed. No statements will be mailed to parents. No phone calls will be made to parents as a reminder of overdue tuition. Failure to pay tuition may result in student being withdrawn from the Prekindergarten Program at the end of the month.

6. I agree that my child must remain at the school for the full day at the Early Learning and the regular bell times at the elementary campuses.
7. I have paid my \$50 non-refundable deposit.

Parent/Guardian Signature

Date

Office Use Only:

Date Received: _____

Date copy fwd to finance: _____

Please attach a copy of Registration Application & Payment Agreement form with first tuition payment to Accts Payable.