

**Woodrow Wilson Academy Pre-K**

8300 W. 94<sup>th</sup> Avenue  
Westminster, CO. 80021  
303-431-3694 ext. 178

**Intent Form**

(Complete one per child)

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(First) (Middle) (Last)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Best phone # to contact you: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Mothers Name: \_\_\_\_\_ Fathers Name: \_\_\_\_\_

Has your child attended any other preschool program? \_\_\_\_\_

Does your child have an IEP or been through Child Find? \_\_\_\_\_

If yes, please briefly explain the outcome:

\_\_\_\_\_

Do you have other children who attend Woodrow Wilson Academy? \_\_\_\_\_

How did you hear about WWA's Pre-K Program?

\_\_\_\_\_

**I intend to enroll my child in WWA's Pre-K class. I would prefer the following (please list 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> choice):**

\_\_\_\_\_ Monday thru Friday (full day) 7:45-2:45

\_\_\_\_\_ Monday, Wednesday, Friday (full day) 7:45-2:45

\_\_\_\_\_ Monday, Wednesday, Friday (half-day) 7:45-11:30

\_\_\_\_\_ Tuesday, Thursday (full day) 7:45-2:50

**\*We will do our best to honor your first request. We will contact you with your child's placement once the first-round choice enrollment lottery is complete in early February.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)