

# CRESTWOOD HILLS PRESCHOOL

a cooperative community since 1953

## *Application*

**Family Information**

**Child's Name** \_\_\_\_\_  
*Last*
*First*
*Middle*

Birth Date \_\_\_\_\_ Gender \_\_\_\_\_

**Parent/Guardian 1** \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
*Last*
*First*

Address \_\_\_\_\_  
*Street Address*
*City*
*State*
*Zip*

Phone \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_

Interests \_\_\_\_\_

**Parent/Guardian 2** \_\_\_\_\_ Relationship to Child \_\_\_\_\_  
*Last*
*First*

Address  Check if same \_\_\_\_\_  
*Street Address*
*City*
*State*
*Zip*

Phone \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_

Interests \_\_\_\_\_

**Program Preferences**

***Please indicate the year and program for which you are applying, as well as your class preferences:***

Year <i>(select one)</i>	Program <i>(select one)</i>	Class <i>(select up to 2)</i>	Preference
<input type="checkbox"/> 2022-23	<input type="checkbox"/> 3s	<input type="checkbox"/> Morning	<input type="checkbox"/> 1st choice <input type="checkbox"/> 2nd choice <input type="checkbox"/> No Preference
<input type="checkbox"/> 2023-24	<input type="checkbox"/> 4s	<input type="checkbox"/> Afternoon	<input type="checkbox"/> 1st choice <input type="checkbox"/> 2nd choice <input type="checkbox"/> No Preference
<input type="checkbox"/> 2024-25	<input type="checkbox"/> Pre-K (age 5+)	<input type="checkbox"/> Pre-K (all day)	

Child's age on September 1st of the year for which you are applying: \_\_\_\_\_  
*Years*
*Months*

Please check if you would like additional information about Financial Aid at Crestwood.

**Please check all applicable categories, and provide the information requested:**

- Active Member of Crestwood Hills Homeowners' Association and/or live within the Crestwood Hills boundaries (*\*please provide proof of residency – e.g., utility bills*)
- Sibling of Present Student \_\_\_\_\_  
*Name and Class*
- Sibling of Former Student \_\_\_\_\_  
*Name and Year(s) Attended*
- Child of Alumni \_\_\_\_\_  
*Name and Year(s) Attended*
- Crestwood Parent & Me Program \_\_\_\_\_  
*Year(s) Attended*
- Referred by Crestwood Staff or Family \_\_\_\_\_  
*Name*
- Previously Applied to Crestwood Hills Preschool \_\_\_\_\_  
*Year*
- Early Childhood Programs Attended \_\_\_\_\_  
*Program/School and Year(s)*

**How did you first learn about Crestwood?** \_\_\_\_\_

**Help Us Get to Know You**

**Please answer each of the following questions in 150 words or less. Feel free to attach a separate sheet of paper should you need more space.**

1. What adjective or quality do you believe best describes your child? Please tell us a story or anecdote that illustrates your choice.

2. What attracts you to Crestwood Hills Preschool?

3. If there is anything else that you believe will assist us in getting to better know your child and family, please share.

***The application fee of \$100.00 must accompany your application. You may submit payment via: (1) online, <https://crestwoodhillscoop.org/admissions> (2) call the office with a credit card, 310-472-1566; or (3) check, made payable to Crestwood Hills Preschool.***

**Please attach a family photograph to complete your application file.**

***You may submit your materials via mail to 986 Hanley Avenue, Los Angeles, California 90049, or e-mail to [membership@crestwoodhillscoop.org](mailto:membership@crestwoodhillscoop.org).***

**Parent/Guardian Acknowledgment and Signature**

*All of the information I/we have provided is true and complete. I/We understand that by submitting an application, our family is not guaranteed admission to Crestwood Hills Preschool. If our circumstances change and our family no longer wishes to be considered for admission, we will promptly notify the school.*

**Parent/Guardian 1 Signature** \_\_\_\_\_

**Parent/Guardian 2 Signature** \_\_\_\_\_

**Tour Date\*** \_\_\_\_\_ **Application Submission Date** \_\_\_\_\_

*\*A tour is required in order for your application to be considered.  
Please visit [crestwoodhillscoop.org/admissions](https://crestwoodhillscoop.org/admissions).*

*For Office Use Only: Date Received: \_\_\_\_\_ Payment Type: \_\_\_\_\_*