

Greek Orthodox Archdiocese of America

Direct Archdiocesan District Office of Education

8 East 79th Street, New York, NY 10075-0106 - Telephone: (212) 570-3552, 3- Fax (212) 774-0248 Web: www.education.goarch.org - E-mail: education@goarch.org

PRE-SCHOOL / DAY-CARE RECORD FORM School Year 2015-2016

SCHOOL NA	ME:						
PARISH:							
			ZIP CODE:				
TEL.:		FAX:					
E-MAIL:							
PRINCIPAL/DIRECTOR:							
MOBILE TEL.:							
E-MAIL:							
PLEASE, INDICATE WHICH OF THE FOLLOWING APPLIES TO YOUR SCHOOL:							
		No. of Studen	<u>u</u>				
	Nursery (3-4 yrs. old)						
	Pre-K (4-5 yrs. old)						
	Kindergarten (5yrs. old)						
	Total Enrollment:						

WEEKLY SCHEDULE OF CLASSES:

		Full Day	Half Day	
	Monday			
	Tuesday			
	Wednesday			
	Thursday			
	Friday			
	Saturday			
	<u>S:</u> <u>Name</u>		Degree(s)	Weekly Hours
	TUITION PER S		nild) \$ (2 nd o	child) \$
Γ	Kindly, use th	e enclosed envelo	ope to mail the form to:	

Direct Archdiocesan District Office of Education ATTN: Mrs. Maria Makedon, *Director* GREEK ORTHODOX ARCHDIOCESE OF AMERICA 8 East 79th Street, New York, NY 10075