

**Kindergarten**

**SELWYN ELEMENTARY SCHOOL**

**2840 Colony Road  
Charlotte, NC 28211**

---

(Child's Name)

---

(Child's Date of Birth)

The beginning school is an exciting time for children and parents. We will provide a caring and nurturing environment that will promote a love of learning and school success!

Please fill out the below form and share specific information about your child. We welcome any information that will help us make suitable class assignments. All classrooms will be put together with thought and consideration for the needs of all children. **Please *do not* request a particular teacher.**

---

**PRESCHOOL EXPERIENCES/ PRESCHOOLS ATTENDED:**

**LANGUAGE/LITERACY /MATH DEVELOPMENT:**

**SOCIAL CHARACTERISTICS:**

**SPECIAL HEALTH/PHYSICAL NEEDS:**

**SIBLINGS OR RELATIVES CURRENTLY ATTENDING OR ENTERING SELWYN:**

**COMMENTS OR CONCERNS:**

---

(Parents' Names)

---

(Address)

---

(Phone Number)

***Please Mail by June 1, 2018***