

Derry Cooperative School District

16-17 Full-Day Kindergarten Application

Students will be selected based on the order applications are received. Applications with the deposit can be brought to the school your child will attend starting **Tuesday March 15, 2016** during the hours of **7:30am to 4:00pm**. While we offer our half day kindergarten program at no cost, our full day program is fee based and we do not offer any scholarships or reduced rates as it is a self- funded program. The cost of the program is \$3,600 per year. Payments of \$360.00 are due on the first of each month starting in September. **A deposit of \$360 is due with the application and will be applied towards the June 2017 payment.** Personal checks, credit card, money orders, and cash will be accepted for your deposit however monthly payments **must** be made using our FACTS online payment system. Instructions on how to access FACTS will be sent to you in August prior to your first payment due date.

Students selected for the full-day kindergarten program will attend school during regular school hours of 8:35 a.m. to 2:55 p.m. They will eat lunch at school, and if eligible, transportation will be provided on regular school buses.

Beyond the selection process, payment of the deposit does not provide students with any special consideration or entitlement with respect to their participation in the full-day program. Should you need to request a refund, such a request must be made in writing to the Business Administrator. Refunds will be reviewed on an individual basis and will be processed at the end of the school year. In most cases, refunds will be made on a pro rated basis. Withdrawals must be communicated in writing to the Business Administrator. Please note that the tuition payment covers the second half of the day for curriculum, not daycare, therefore we cannot receive state vouchers as payment. Private daycare programs after school are offered at each school and can be contacted directly.

For questions please contact Jane Simard, Business Administrator jsimard@sau10.org 432-1210 or your school's principal.

Child's Name _____

Date of Birth _____ Male _____ Female _____

Parent/Guardian Name _____

Address _____

Home Telephone # _____ Cell # _____ Work # _____

Email _____

Neighborhood School _____

School Representative _____

Reminder: Applications WILL NOT be accepted until Tuesday March 15, 2016
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