



## APPLICATION FOR ENROLLMENT

Studio Creative Play will promptly contact all applicants notifying them of their application status. Once accepted to Studio Creative Play, participants will receive and be asked to submit additional information.

**Name of Child 1:** \_\_\_\_\_

**Address/Telephone:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **\_\_\_Male** **\_\_\_Female**

**PROGRAM:** \_\_\_\_\_

**SIBLING/Name of Child 2:** \_\_\_\_\_

**Address/Telephone:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**PROGRAM:** \_\_\_\_\_

**Name of Parent/s 1:** \_\_\_\_\_

**Address, City, and ZIP:** \_\_\_\_\_

**Telephone/E-mail:** \_\_\_\_\_

**Name of Parent/s 2:** \_\_\_\_\_

**Address, City, and ZIP:** \_\_\_\_\_

**Telephone/E-mail:** \_\_\_\_\_

**1.) How did you learn of Studio Creative Play?**

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2.) Is the child for which you are applying enrolled in any child-care facilities, preschools, or other arts-based programs? If so, how many hours of the week do they attend these programs?

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**3.) Please give a brief personality description of each child for which you are applying. Be sure to mention strong likes or dislikes, developmental advances or delays, or environments or activities in which the child thrives or seems less inspired. Knowledge of strong or unique preferences is useful in understanding how children might individually process information, learn, and create. Feel free to contribute more information on an attached sheet.**

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

**4.) Please offer what is most appealing about Studio Creative Play's programs and why it is important that your child and family participate.**

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**If you have any questions regarding this application or scholarships, please contact studio Director, Khaatee V. Turner, at 718.623.2775**