



Colchester Elementary School

315 Halls Hill Road
Colchester, Connecticut 06415
Phone: (860) 537-0717
Fax: (860) 537-6573
www.colchesterct.org

Judy O'Meara
Principal

Meghan B. Amado
Assistant Principal

October 2022

Dear Parent(s)/Guardian(s):

Thank you for expressing interest in our integrated program for preschoolers with and without disabilities. Colchester Public Schools provides an opportunity for 3-, 4-, and 5-year-old children to obtain an early childhood preschool education at the Colchester Early Childhood Program. **There is an annual tuition cost of \$750 (\$75 per month) for part-day classrooms and \$1,500 for school-day.**

The Mission Statement, Philosophy and Goals, and the objectives of the program are available on our website at www.colchesterct.org. After reviewing it, if you are interested in having your child attend the program, complete the application form and return it by **January 31, 2023 to:**

Judy O'Meara, Principal
Colchester Elementary School
315 Halls Hill Road
Colchester, CT 06415

Children will be selected at random through a lottery process. Selection will be made in the month of February by a school administrator. In February, letters will be sent to families to let you know when the lottery will be held. Those not selected for immediate placement will be placed on a waiting list. Children who are not yet 3 by the start of the school year will have to wait until their third birthday to attend.

We suggest that your child attends a preschool screening session. Please visit our website to [schedule a pre-screening](#).

Sincerely,

Judy O'Meara
Principal

**COLCHESTER PUBLIC SCHOOLS
COLCHESTER EARLY CHILDHOOD PROGRAM
APPLICATION**

CHILD'S NAME: _____

DATE OF BIRTH: _____ **AGE AS of 8/31/23:** _____ YR _____ MO
(Must be 3 to begin.)

PARENT(S)/GUARDIAN(S): _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

CELL: _____ EMAIL : _____

**PLEASE PLACE MY CHILD:
CHOOSE ONLY ONE**

_____ **IN THE PART-DAY THREE YEAR OLD LOTTERY**

_____ **IN THE PART-DAY FOUR YEAR OLD LOTTERY**

_____ **IN THE SCHOOL-DAY LOTTERY**

Based upon the information presented regarding the integrated preschool program, I am interested in having my child attend. I understand that if my child is selected for participation I will be charged tuition and will need to complete registration forms, including **records of required immunizations**.

Parent/Guardian Signature

Date

PLEASE RETURN BY JANUARY 31, 2023 TO:

Judy O'Meara
Principal
Colchester Elementary School
315 Halls Hill Road
Colchester, CT 06415

We encourage you to schedule a screening for your child once they turn 3 years old. Any concerns before your child turns 3 years old can be discussed with your pediatrician. You do not need to schedule a screening to add your child to the lottery. PLEASE CHECK BELOW:

_____ MY CHILD HAS BEEN SCREENED BY THE PRESCHOOL TEAM
DATE OF SCREENING: _____

_____ MY CHILD HAS A SCHEDULED APPOINTMENT WITH THE PRESCHOOL TEAM – DATE
OF ANTICIPATED SCREENING: _____