



Application for Admission

Child's Name _____ Goes-by Name _____
(first) (middle) (last)

Date of Birth _____ If born premature, at how many weeks? _____ Gender _____

Primary Address _____
(street) (city/state) (zip)

Parent 1 _____ Mother Father Other _____

Address _____ Same address as primary Jewish Other

Email _____ Occupation _____

Phone #s Home _____ Cell _____ Work _____

Parent 2 _____ Mother Father Other _____

Address _____ Same address as primary Jewish Other

Email _____ Occupation _____

Phone #s Home _____ Cell _____ Work _____

- Currently enrolled (SY 24-25) Previously enrolled
- Parent attended TRS ECC (formerly TRS Nursery School) Sibling of current/former student _____

- Member of Temple Rodef Shalom
- Interested in Temple membership

Our membership team will reach out with info about joining TRS!

Limited scholarships are available. Please contact ECC Director Rene Shiohama (rshiohama@trsecc.org)

To register, please submit the following:

- A completed **Application for Admission** (all 4 pages)
- **\$125 non-refundable application fee.** Please make checks payable to **TRS ECC.**

How to submit your application: (choose one option)

- Hand your child's teacher the completed packet (during drop-off or pick-up) including a check for \$125.
- Bring the completed application and a \$125 check to the ECC office.
- Email the completed application to Alison Ahmed (aahmed@trsecc.org)
 - Mail \$125 check to the ECC office: TRS ECC, Attn. Alison Ahmed, 2100 Westmoreland St, Falls Church, VA 22043

OFFICE USE ONLY

Application # _____ Date received _____ Received by _____

Application fee received Check # _____ **WITHDRAWN** Date _____

Birth certificate/passport # _____ Viewed by _____ Date _____



Application for Admission

How did you learn about TRS Early Childhood Center? _____

Has your child attended preschool or childcare elsewhere? Yes No If yes, please list below:

School/Childcare center _____ Dates attended _____

School/Childcare center _____ Dates attended _____

Is there any information you'd like to share with us so your child finds success in our program?

The following information is helpful to teachers supporting your child.

Has your child been privately evaluated or evaluated by Parent-Infant Education (PIE), Infant-Toddler Connection, or Child Find? Yes No If yes, provide IEPs and evaluation/therapy reports, if possible.

Has your child been offered class-based services by the county or city? Yes No

Does your child have difficulty in any of the following areas?

- Speech/Language Vision Hearing Motor skills Sensory integration
- Social behavior/Play skills Cognitive development Other: _____

Is your child undergoing any treatment or therapy to address these or other concerns?

Yes No If yes, please describe: _____

My signature below certifies the information I provided on this application is true, accurate, and complete, and gives TRS ECC permission to contact any of the schools or evaluators referenced above.

Parent Signature _____ Date _____

Application for Admission

Child's Name _____ Goes-by Name _____
 (first) (middle) (last)

Date of Birth _____ Age on 9/30/25 _____ Gender _____

REQUIRED: Please list order of preference (#1, 2, 3) for programs listed below.

Programs marked with ⌚ are eligible for Extended Aftercare (registered separately; fees apply)

Stepping Stones - Transitioning to Preschool

For children turning 2 between 10/1/25 and 12/31/25 - Children are not expected to be toilet independent.

A parent or caregiver will start the year attending with the child. During the first 3-4 months of the year, the teacher will work with families to transition their child to attending independently. *The exact transition timeline is tailored to the class's needs.*

_____ 2 days Tuesday/Thursday 9:30 a.m. - 11:30 a.m.

2s Programs

For children turning 2 before 9/30/25 - Children are not expected to be toilet independent.

_____ 2 days Tuesday/Thursday 9:00 a.m. - 12:00 p.m. ⌚

_____ 3 days Monday/Wednesday/Friday 9:00 a.m. - 12:00 p.m. ⌚

_____ 5 days Monday - Friday 9:00 a.m. - 12:00 p.m. ⌚

3s Programs

For children turning 3 before 9/30/25 - Children are expecting to be working towards toilet independence.

_____ 3 days Monday/Wednesday/Friday 9:00 a.m. - 12:00 p.m.

_____ 4 days Tuesday - Friday 9:00 a.m. - 12:00 p.m.

_____ 5 days Monday - Friday 9:00 a.m. - 12:00 p.m.

_____ 5 days EXT Monday - Friday 9:00 a.m. - 2:00 p.m. ⌚

Pre-K Programs

For children turning 4 before 9/30/25 - Children are expected to be toilet independent.

_____ 5 days Monday - Friday 9:00 a.m. - 12:00 p.m.

_____ 5 days EXT Monday - Friday 9:00 a.m. - 2:00 p.m. ⌚

Kindergarten

For children turning 5 before 9/30/25. We request new families provide student records from any school(s) their child attended in SY 24-25.

_____ 5 days Monday - Friday 9:00 a.m. - 3:00 p.m. ⌚

Parent Signature _____ Date _____

