

11810 Falls Road
Potomac, MD 20854



Phone: (301) 279-7505
Fax: (301) 354-3200
www.whcecc.org

Dear Parents,

Thank you for your interest in the Washington Hebrew Congregation Primary School for the school year 2011-2012. Our Primary School offers a challenging secular curriculum with an integrated Judaic component in a nurturing environment for children in Gesher (pre-k) and Kindergarten.

The hours for WHC Primary School are:

Gesher

- 9:00 am – 2:00 pm, Monday – Friday

Kindergarten

- 9:00 am – 3:00 pm, Monday – Thursday
- 9:00 am – 2:30 pm, Friday

Tuition rates for the current year's programs are listed below and are based on a 9-1/2 month school year. There will be an increase for the school year 2011-2012, subject to approval by the Board of Directors of the Washington Hebrew Congregation. If more than one child from the same family is enrolled in the Rabbi Joseph Weinberg Early Childhood Center and/or the WHC Primary School, there will be a reduction in the basic tuition for each additional child enrolled.

**2010-2011 School Year Tuition
(based on a 9-1/2 month school year)**

	<u>Temple Members</u>	<u>Non-members</u>
Gesher	\$11,537	\$13,111
Kindergarten	\$12,578	\$14,626

Applicants to the WHC Primary School must meet the following minimum age requirements:

Gesher	Must have completed a 4 year old program
Kindergarten	Must turn five by September 1, 2011

Applications may be returned upon receipt. When you return your application, please complete it in full and submit it along with two checks – one representing a **\$100 non-refundable application fee and the other a non-refundable \$500 tuition deposit. Please make your checks payable to the Washington Hebrew Congregation and enclose a copy of the child's birth certificate if your child is new to our school.**

For applicants new to our school, enclosed is a Confidential Student Recommendation Form. Please have your child's current teacher complete and return the form as soon as possible. Thereafter, we will contact you to arrange an appointment at the WHC Primary School for you and your child for an observation and screening.

Provided all of the supporting information is completed in time, notification regarding acceptance will be mailed starting January 15, 2011.

The professional staff of the Washington Hebrew Congregation Primary School makes every attempt to create heterogeneous, well-balanced classes. We carefully consider teacher input as well as the ages, personalities, genders and interactions among the children. While we value parental input, the final decision on placement must be left to WHC Primary School administration. The administration reserves the right to exercise professional discretion as to the placement and continuation of a child in any of our programs.

If your child is accepted in the Washington Hebrew Congregation Primary School, a **non-refundable** tuition payment of **\$2,500** will be due no later than January 31, 2011. The balance of your tuition will be billed in late July or early August. One half will be due in August and the remainder will be due in November. **All fees and deposits are non-refundable and non-transferable if your child is accepted to the Washington Hebrew Congregation Primary School.**

The accounts of WHC members and currently enrolled students must be current in order to register. A WHC member must be in good standing in the Fair Share program at the time of registration and is responsible for financial obligations to WHC through June 30, 2012. Please contact Lancia Swerdloff at 202-362-7100 if you have questions regarding your membership status. There are limited scholarship funds for RJWECC/WHCPS tuition assistance, and requests are handled confidentially. Please contact the school regarding scholarship funds or your school account.

If you have any questions, please do not hesitate to call me at 301-279-7505.

Sincerely,

A handwritten signature in cursive script that reads "Phyllis Shankman".

Phyllis Shankman
Director, Early Childhood/Primary Education



WHC Primary School

Application for Admission: 2011-2012

APPLICANT INFORMATION (PLEASE TYPE OR PRINT CLEARLY)

Current Grade: _____

Grade applying to: _____

APPLICANT INFORMATION

Applicant's Full Name _____
Last First Middle

Goes By: _____ Male/Female _____ Date of Birth _____ Current Age: _____
month/day/year

Home Address _____
Street address City State Zip

Home Telephone _____ Family Email Address _____

Present School _____ School Address _____

Schools Previously Attended (if applicable) _____

Siblings: Name(s), Age(s), School(s) _____

PARENT/GUARDIAN INFORMATION

Relationship to applicant _____

Title (Mr., Mrs., Dr., other) First Name Last Name

Street Address (if different from applicant)

City State Zip

Home Phone (if different from applicant)

Mobile Phone

Business Phone

Additional Email Address

PARENT/GUARDIAN INFORMATION

Relationship to applicant _____

Title (Mr., Mrs., Dr., other) First Name Last Name

Street Address (if different from applicant)

City State Zip

Home Phone (if different from applicant)

Mobile Phone

Business Phone

Additional Email Address

Applicant lives with (check any that apply) Father Mother Stepfather Stepmother Other _____

Parents' religious backgrounds (please indicate mother/father or both): _____ Reform _____ Conservative _____ Orthodox _____ non-Jewish _____ none

Are you members of Washington Hebrew Congregation? (Y/N) _____ Are you affiliated with another Congregation? Which one? _____

I wish to enroll my child in the WHC Primary School Program. **I enclose two checks made payable to Washington Hebrew Congregation – one representing a non-refundable \$100 application fee and the other a non-refundable \$500 tuition deposit.** If my child is accepted, I agree to make a **non-refundable tuition payment of \$2,500**, due no later than January 31, 2011, to hold his/her place in the school. I further understand that I am responsible for, and agree to pay, the complete 2011-2012 tuition fee if my child is accepted and enrolls in the program in addition to a security fee for each family. I understand that if I am a Temple member, I am responsible for my fair share financial obligations to WHC and must be current through June 30 of the school year for which my child is registering.

The WHC Primary School staff reserves the right to exercise professional discretion as to the placement and continuation of a child in any of its programs.

Parent's name (please print) _____

Signature _____ Date _____

APPLICANT'S FULL NAME _____

GRADE APPLYING TO: _____

7. What are some of your expectations for your child's experience in school this coming year?

8. How did you learn about the WHC Primary School?

HAS YOUR CHILD BEEN EVALUATED OR RECEIVED ANY SPECIAL SERVICES? PLEASE EXPLAIN BELOW.

Type of evaluation/service

Please provide the nature/dates/contact information for evaluation or service as appropriate.

__ Psychological/Developmental

__ Speech/Language

__ Occupational Therapy

__ Other

Please enclose test reports or have reports sent to the Registrar at our school.

WHY WOULD YOU LIKE YOUR CHILD TO ATTEND THE WHC PRIMARY SCHOOL?

IS THERE ANYTHING ELSE YOU WOULD LIKE US TO KNOW ABOUT YOUR CHILD?

I give permission for the professional staff of the Washington Hebrew Congregation Primary School to contact any professional involved in the assessment, education or treatment of my child, _____, for additional information.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (please print) _____