Dallas Torah Center Preschool Student Application 2025-2026



STUDENT INFORMATION		
Student Information		
Please fill in the following fields about the student/s you are applying for as thoroughly as possible. If you have more than one Preschool applicant, please submit another form.		
Basic Information		
Name your child would like to be called	Last Name	
Legal name (if different than above)	Hebrew Name	
Grade Applying for		
Gender	Birthdate	
Race		
Is the student's mother Jewish by birth?	Please upload conversion documentation.	
Please upload a recent photo:		
Previous Schools	-	
Where did the child most recently attend school?		
Please list the name of the school/ gan, the name of the director, and a way to contact them (email/phone).		

Did your child attend any schools, gans, teacher-led groups, etc. prior to the one listed above?			
Please list the name of the school/ gan, the name of the director, and a way to contact them (email/phone).			
Additional Student Information			
Is there anything about your child's developed therapy, occupational therapy, testing, physical street in the street and the street anything about your child's developed the street anything anything are street and the street anything and the street anything any street any street and street any street any street any street and street any street and street any street any street and street any street and street any street and street any street and street any street any street any street any street and street any street any street and street any street and street any street any street and street any street any street and street any street and street any street any street and street any street any street any street and street any street and street any street any street any street and street any street any street and stre	mental history that wo	ould be important to know elopment, interventions/tr	v about in the school setting? (ex. speech eatments, diagnoses, family life)?
Please explain.			
		1	
Is there a court-ordered custodial arrangement?		Please upload custody	documents here.
Medical Information			
Does the student have any medical condition	ns?		
There will be further questions regarding alle that you would like to share with us in order	ergies and medication to allow for a discussi	on the enrollment packe ion about whether or not	et. Right now, please list any medical condition or disability Dallas Torah Center can meet your child's need.
Parent/Guardian 1 Information	1		
Title First Name			
Last Name			
Relationship to Student		Marital status	
Address			
City	State		Zip
Custodial Rights?		Financial Responsibility	/

Home Phone			Cell Phone		
Primary Email					
Occupation			Employer		
Would you like to add in	formation for Parent	2 part of a separate	household?		_
Title	First Name				
Last Name					
Relationship to Student			Receive Correspondence	ce?	
Cell Phone			Primary Email		
Occupation			Employer		
Title	First Name				
Last Name					
Relationship to student					
Marital status					
Address					_
City		State		Zip Code	
Custodial Rights?			Financial Responsibility		
Custodial Rights? Home Phone			Financial Responsibility Cell Phone		

Primary Email		
Occupation	Employer	
How did you hear about us?		
Please explain.		
Does the applicant have any siblings entering grades Pre-K (4 ye	ears) through grade 8 who are NOT applying to Dallas Torah Center?	
Names, ages/grades, and current schools of siblings:		
Religious Affiliation		
Name of your Rabbi	Name of your shul/congregation	

DOCUMENTS

Documents		
I have reviewed the state's <u>immunization requirements</u> and agree to comply with them. I understand that DTC requires children to be up to date with state-required vaccinations and that DTC does not accept the Texas Affidavit Exemption From Immunizations for Reasons of Conscience or any other non-medical exemptions. Any <u>medical exemption</u> needs specific approval from the administration.		
Signature	Date:	

TUITION FEES AND ACADEMIC CALENDAR

Tuition Fees and Academic Calendar

Application/Enrollment Fee

There will be a \$275 non-refundable application fee due at the time you submit this application. The application can not be submitted without payment. If you decide to enroll, this payment will be applied to your registration fee. If we can not accept your child due to lack of space or because we can not meet their needs, your application fee will be refunded.

If you are accepted and choose to enroll, the \$275 fee will go towards your enrollment fee of \$550. Payments may be Zelled to dallastorahcenter@gmail.com

SIGNATURES

Signatures		
Non-discrimination policy		
	oyer and does not discriminate in its hiring of personnel, nor and loan programs and athletic and other school-administered programs.	
Electronic Signature		
The electronic signatures below and their related fields are t paper form.	reated by Dallas Torah Center like a physical handwritten signature on a	
Agreements		
My signature below affirms that all of the information contained in this application is correct, complete, and honestly presented. I understand that withholding or misrepresenting information in this application may jeopardize my child's admission.		
Name	Date	