

Dallas Torah Center Preschool

New 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, gangs, teacher-led groups, etc. prior to the one listed above?

Please list the name of the school/ gang, the name of the director, and a way to contact them (email/phone).

Additional Student Information

Is there anything about your child's developmental history that would be important to know about in the school setting? (ex. speech therapy, occupational therapy, testing, physical or emotional development, interventions/treatments, diagnoses, family life...)?

Please explain.

Is there a court-ordered custodial arrangement?

Please upload custody documents here.

Medical Information

Does the student have any medical conditions?

There will be further questions regarding allergies and medication on the enrollment packet. Right now, please list any medical condition or disability that you would like to share with us in order to allow for a discussion about whether or not Torah Day School can meet your child's need.

Parent/Guardian 1 Information

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 information for Parent 2 part of a separate household?	

Title	First Name
Last Name	
Relationship to Student	Receive Correspondence?
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
Home Phone	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 years) through grade 8 who are NOT applying to Torah Day School of Dallas?

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 [immunization requirements](#) 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 [medical exemption](#) 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 \$200 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 \$200 fee will go towards your enrollment fee of \$400.

SIGNATURES

Signatures

Non-discrimination policy

Dallas Torah Center Preschool is an equal opportunity employer and does not discriminate in its hiring of personnel, nor does it discriminate in its admissions policies, scholarship and loan programs and athletic and other school-administered programs.

Electronic Signature

The electronic signatures below and their related fields are treated by Torah Day School of Dallas like a physical handwritten signature on a paper form.

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