



Application for Admission 2026-2027

For Office Use Only

Date Received: _____

Time: _____

Deposit: _____

Applicant's Last Name _____ **Applicant's First Name** _____

Our Applicant is: currently enrolled at SPNDS.
 part of an Alumni Family.
 New!

I/We are applying for the following program(s) for our child:

PreK and Kindergarten Complement Programs	
Play Pals (2-year-olds; 2 hours M-F/five mornings per week) 9:15-11:15	
Nursery Day School (Pre-K students ages 3-5-years-old; M-F/five days per week) 9:00-11:45	
MORNING Kindergarten Complement (M-F/five days per week) 9:00-12:30	
AFTERNOON Kindergarten Complement (M-F/five days per week) 11:30-3:00	

Please indicate on which days you'd like to enroll your child in our EXTENDED DAY PROGRAMS, if applicable. Minimum of two days per week is required.

Extended Day Programs (Add-Ons, Optional)	Monday	Tuesday	Wednesday	Thursday	Friday
Early Birds , 8:15-9 a.m. (AM K and Nursery Day School Students only)					
Lunch Bunch 11:45 – 2:45 (Nursery Day School students only)					
Stay & Play 2:45-3:30 (Lunch Bunchers and PM K only)					

Applicant Information

Birthdate (MM/DD/YYYY) _____ Age on September 1, 2026 _____

Nickname _____ Gender _____

Address _____

Language(s) Spoken _____ Elementary School (K only) _____

Current school/ previous experience in a school setting: _____

Has your child had Early Intervention services of any kind? Yes / No

Does your child have an IEP? Yes / No

Does your child have any allergies or physical limitations? Yes / No

If you answered "yes" to any of the above questions, please elaborate.

Family Information

Parent/Guardian 1 First & Last Names _____ Address _____ _____ Email _____ Cell Phone _____ Home Phone _____ Occupation _____ Employer _____	Parent/Guardian 2 First & Last Names _____ Address _____ _____ Email _____ Cell Phone _____ Home Phone _____ Occupation _____ Employer _____
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2026-2027 Tuition Schedule and Application Fee

Please note that our annual budget is based on full-year enrollment. Each student's financial commitment is for the entire school year, and tuition is non-refundable except upon approval by the SPNDS Advisory Committee. Families may choose to pay the full-year tuition at once or in 10 installments.

PLAY PALS		NURSERY DAY SCHOOL		KINDERGARTEN COMPLEMENT		LUNCH BUNCH			EARLY BIRD STAY & PLAY (EACH)		
Full Year	10-month payment plan	Full Year	10-month payment plan	Full Year	10-month payment plan	Days/week	Full Year	10-month payment plan	Days/week	Full Year	10-month payment plan
\$4,851	\$485	\$5,710	\$571	\$5,900	\$590	5	\$5,069	\$507	5	\$993	\$99
						4	\$4,916	\$492	4	\$930	\$93
						3	\$4,633	\$463	3	\$865	\$86
						2	\$4,308	\$431	2	\$802	\$80

- You may return your application to SPNDS in one of the following ways:
 - Current families may send the application into school in their child's folder
 - Place the application in the metal drop box at the main entrance of SPNDS between 8:00 a.m. and 3:30 p.m. (at the top of the steps near door). Park in the lot behind the building, using the lot entrance closest to Chester Rd.
 - Mail to SPNDS (must be postmarked on or after February 2, 2025, for new students.)
 - Send via email to kristin.dibona@swarthmorepres.org (see Admissions Policies and Procedures document for more information)
- A non-refundable **\$75.00 application fee per family** is due at the time of application submission. Please make your check out to **SPNDS**.
- **SCHOLARSHIPS** covering partial tuition are available; inquiries may be made to Deborah Hansen, Director, at deborah.hansen@swarthmorepres.org.

Parent/Guardian Signatures _____ | _____