

**CHEEKTOWAGA CENTRAL SCHOOL DISTRICT**  
**UPK to KINDERGARTEN 2018-19 ----- QUESTIONNAIRE**

Dear Parent or Guardian of Current UPK Student:

**In order to prepare for your child's advancement to kindergarten in the fall, please complete the following brief questionnaire and return it by March 1 to the Cheektowaga Central School District - Registration Office. You may mail it, or bring it in person to the Registration Office or Union East Office at 3600 Union Road, Cheektowaga, NY 14225; or fax to (716) 681-5232; or scan and email to [Registration@ccsd-k12.org](mailto:Registration@ccsd-k12.org).**

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Parent or Guardian name (last, first) \_\_\_\_\_

Street address \_\_\_\_\_

\_\_\_\_\_

Phone number \_\_\_\_\_

Student name (last, first, middle) \_\_\_\_\_

Student date of birth \_\_\_\_\_

UPK location \_\_\_\_\_

Please describe your child's preschool experience: \_\_\_\_\_

\_\_\_\_\_

Has your address changed in the last year?      Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, is the above address your current address? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the child's address the same as your address?      Yes \_\_\_\_\_ No \_\_\_\_\_

Will your child attend kindergarten at Union East? Yes \_\_\_\_\_ No\* \_\_\_\_\_

\*If no – where do you plan to enroll your child in kindergarten?

\_\_\_\_\_

**Thank you!**

*Office use: Student ID # \_\_\_\_\_ Date Processed: \_\_\_\_\_*