



It is our goal to provide a smooth transition for your child as he or she enters our school. The more information we have, the better able we are to create learning environments that enable your child to reach his or her full potential.

With this in mind, we ask for your permission to access information about your child's previous school experience.

- Winnetka Public School Nursery

Name of Child _____

Date of Birth _____

Name of Current School _____

Teacher _____

_____ Yes, I give my current school permission to share relevant information about my child with Winnetka Public School Nursery.

_____ No, I do not give my current school permission to share relevant information about my child with Winnetka Public School Nursery.

Signature _____ Date _____

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