



# SURVEY OF PRESCHOOL CHILDREN

DATE

NAME OF SCHOOL

NAME OF PARENT OR GUARDIAN

EMAIL ADDRESS

TELEPHONE

Last

First

M.I.

ADDRESS OF RESIDENCE House Number Street

Apartment Number

City

State

Zip Code

**REQUIRED ENROLLMENT:** Virginia law, Section 22.1-254, requires that children who will reach their fifth birthday on or before September 30, 2025, must be enrolled in Kindergarten for the 2025-2026 school year unless the parent or guardian notifies the school in writing that they do not wish the child to attend school until the following year.

List ONLY the name(s) of child(ren) who will be 5 years of age as of September 30, 2025.

NAME OF CHILD	GENDER		BIRTHDATE			SCHOOL CHILD WILL ATTEND IN 2025-2026			IF ENTERING FAIRFAX COUNTY PUBLIC SCHOOLS AFTER 2025-2026		I WILL ENROLL THIS CHILD	I WILL NOT ENROLL THIS CHILD	
	MALE	FEMALE	MONTH	DAY	YEAR	FCPS KINDER-GARTEN	FCPS 1ST GRADE	OTHER	NONE	EXPECTED ENTRY YEAR (as of September)			EXPECTED ENTRY GRADE
1 Last First M.I.	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
2 Last First M.I.	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
3 Last First M.I.	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Signature of Parent or Guardian

Date

Children with disabilities may be eligible for special services. Contact your local elementary school for additional information.  
**COMPLETE, SIGN, AND RETURN THIS FORM TO YOUR LOCAL ELEMENTARY SCHOOL BY MARCH 31, 2025.**  
 Data collected via this form is for use at the local elementary school.