



St. Bernadette School  
 245 Azalea Drive  
 Monroeville PA 15146  
 412-372-7255  
[www.st-bernadette-school.org](http://www.st-bernadette-school.org)  
[www.schooloffice@stbpitt.com](mailto:www.schooloffice@stbpitt.com)

A St. Bernadette School 4 Year Preschool Program operates throughout the school year. The purpose is threefold: first, to provide a formal early childhood religious education; second, to further improve the continuity of academic progress offered at St. Bernadette School; third, to offer a community service that will better utilize existing parish facilities.

**Philosophy** - St. Bernadette Preschool imparts Gospel values by creating an atmosphere that encourages religious, social, physical and emotional development in early childhood.

**Curriculum** - The core of the program includes activities in Catholic religious education activities to develop positive self-image, self-expression, socialization, motor coordination and perceptual skills.

**Staff** - The teacher of each program is an individual trained in Early Childhood Education. The program is under the direction of the Principal of St. Bernadette School. A permanent teacher aide is employed for each program.

**Transportation** - Transportation is the responsibility of the parent.

**Registration** - To be eligible for the 4 year old program children must be 4 years of age by September 1. Parishioners' registrations will be accepted first. A non-refundable registration fee of **\$50 per family** is required for those entering the preschool program. The fee will be applied towards the tuition. A birth certificate must be presented at the time of registration.

**Sessions** – Monday, Wednesday, Friday - 9:00 a.m.– 3:00 p.m. full day; 9:00 a.m. – 11:30 a.m. half day

PLEASE CALL THE SCHOOL OFFICE FOR FURTHER INFORMATION

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**ST. BERNADETTE SCHOOL PRESCHOOL REGISTRATION**

Date \_\_\_\_\_

**SESSION:** 4 year-old \_\_\_\_\_

**FAMILY NAME** \_\_\_\_\_

**CHILD** \_\_\_\_\_ M\_\_\_\_ F\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

Father\_\_\_\_\_ Mother\_\_\_\_\_ Maiden name\_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_)\_\_\_\_\_ Religion\_\_\_\_\_ Parish \_\_\_\_\_

Birth Certificate Number \_\_\_\_\_

DATE OF LAST MMR (MEASLES, MUMPS, RUBELLA) VACCINE \_\_\_\_\_

Do you plan to send your child to Kindergarten at St. Bernadette? \_\_\_\_yes \_\_\_\_no \_\_\_\_ not sure