

Woodinville Family Preschool
Job Options Program (JOP) Application for 20__-20__ School Year

The Job Options Program (JOP) is offered as an alternative to the traditional co-op job responsibility format; although participation in the JOP replaces the requirement that you hold a preschool job, it has no bearing on other responsibilities of membership such as registration and tuition fees. If it would be better for your family not to hold a preschool job during the coming school year, you may elect to help cover the cost of outsourcing this responsibility. Each year there is a specific number of JOP slots allocated, usually somewhere between 15-20 slots. If you are interested in knowing the exact number of slots allocated in the coming year, please contact the Director.

If you are interested in participating in the JOP, you may put your name on the wait list for the program at any time by emailing the Director at director@woodinvillefamilypreschool.org. This opportunity is available on a first-come-first-served basis. The annual payment of \$650 is due at the time of your preschool registration in February. If unable to make the entire payment at that time, a family may complete payments in the summer when no preschool tuition is due. **Should you later need to withdraw from the program this payment is non-refundable.** For further information, please see the blue pages of your handbook or contact the Director.

To apply for the Job Options Program, please complete the following and submit with your JOP check for \$650 (payable to *Woodinville Family Preschool*) along with your registration application.

Name _____ Class(es) _____

Phone _____ Email address _____

Attached is my check for the Job Options Program, which provides funds for the preschool to contract out specific job duties. As a participant in this program, my family will not be required to hold a preschool job. All other responsibilities of membership in Woodinville Family Preschool remain the same, as outlined in the Membership Responsibility Agreement. I understand that acceptance into the JOP for this school year has no bearing on my participation during any other school year if space is available and I pay the non-refundable annual fee. I understand that once my check has been submitted to the preschool and I have been notified of my acceptance into this program, the annual fee of \$650 is non-refundable.

Signature _____ Date _____

[] Your check has been received, and you are a participant in the JOP for the 20__-20__ school year.

[] We're sorry, all JOP slots are now filled for the 20__-20__ school year. Your check is being returned, attached to this form.

For Office Use Only

_____ Date director received

_____ Check number

_____ Check amount

_____ Date member notified

_____ JOP number ___ of ___