FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0104 | | | | | | |
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| hours per response: | 0.5 | | | | | | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* CHILDRENS PLACE RETAIL STORES INC | | | . Date of Event lequiring Staten Month/Day/Year 9/02/2003 | | 3. Issuer Name and Ticker or Trading Symbol CHILDRENS PLACE RETAIL STORES INC [PLCE] | | | | | | | |
|---|---------|----------|--|-------------------|---|--------|---|---|--|---|--|--|
| (Last) | (First) | (Middle) | | | 4. Relationship of Reporting Perso (Check all applicable) Director Officer (give title | | on(s) to Issuer 10% Owner Other (specify | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | |
| 915 SECAUCUS ROAD (Street) | | | | | X Officer (give title below) Sr. V.P., Marke | below) | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| SECAUCUS | NJ | 07094 | | | | | | | Form filed Reporting | oy More than One Person | | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | 2. Amount of Securities Beneficially Owned (Instr. 4) | | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securit Underlying Derivative Securit | | ty (Instr. 4) Conve | | se Form: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Expiratio Date | n Title | | Amount or Number of Shares | Price of Derivativ Security | e Direct (D) or Indirect (I) (Instr. 5) | | | |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Brian Kleinberg

09/03/2003

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.