FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | |
|---|---------------------|----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-028 | | | | | | | | |
| - | Fatimated average b | urdon. | | | | | | | | |

37 hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

| Instruct | ion 1(b). | | | Filed | | | | | | | ies Exchanç mpany Act o | | f 1934 | ļ | | Hours | регтезроп | | 0.5 |
|---|---|--|-------------------|----------|-----------------------|--|--|------------------------------|---|-----|--|---|--------|-----------------------|---|---|---|----------------------|---|
| 1. Name and Address of Reporting Person* SILVERSTEIN STANLEY (Last) (First) (Middle) 915 SECAUCUS ROAD | | | | | 1NO 3. Da | Susuer Name and Ticker or Trading Symbol CHILDRENS PLACE RETAIL STORES INC [PLCE] 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2005 | | | | | | | | | 5. Relationship of Report Check all applicable) X Director Officer (give title below) | | y Person(s) to Iss X 10% Ov Other (s below) | | wner (specify |
| (Street) SECAUCUS NJ 07094 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | ′ | | | | |
| | | Tabl | e I - No | n-Deriva | ative | Seci | uritie | s Acq | uired, | Dis | posed o | f, or E | Bene | ficially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Dat | | | | | Exe ay/Year) if ar | | A. Deemed execution Date, any Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | Secur Benef | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Trans | action(s) 3 and 4) | | | (111511.4) |
| Common | Stock, Par | ck, Par Value \$.10 04/01/2005 s 10,000 D \$46.538 3,852,880 D | | | | | | | | | | | | | | | | | |
| Common Stock, Par Value \$.10 04/01/2 | | | | | 2005 | | | | S | | 8,700 | 700 D \$ | | 646.004 | 3,844,180(1) | | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | e Execution Date, | | | ransaction of code (Instr. Deriv | | ative ities red sed | 6. Date Exerci Expiration Da (Month/Day/Y | | e | 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) | | Der Sec (Ins | rice of ivative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owne Form Direc or Inc (I) (In | : t (D) direct | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Includes (i) 3,374,880 shares held by trusts or custodial accounts for the benefit of Mr. Silverstein's children and grandchildren of which Mr. Silverstein's wife is a trustee and as to which Mr. Silverstein's wife has voting control, and as to which Mr. Silverstein disclaims beneficial ownership; (ii) 462,300 shares held in Mr. Silverstein's own name; (iii) 7,000 shares held in Mr. Silverstein's profit sharing account. Does not include 2,164,450 shares directly owned by Ezra Dabah, Mr. Silverstein's son-in-law, or Mr. Dabah's wife.

Exercisable Date

Remarks:

Stanley Silverstein

Title

04/05/2005

** Signature of Reporting Person

Shares

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 4 (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.

(A) (D)