

2018-2019 PA Pre-K Counts Enrollment Form

Governor Mifflin School District

Student Application

(This information is confidential to the PA Pre-K Counts program)

Date Form Completed: _____

Last Name (Child)	First Name (Child)	Middle Initial
-------------------	--------------------	----------------

Street Address	County	
City	State PA	Zip Code
School District of Residence		
Home Phone	Work Phone	Email Address

Child's Date of Birth	Age <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
-----------------------	--	---

Race (optional)	
<input type="checkbox"/> Black or African American	<input type="checkbox"/> American Indian or Alaskan
<input type="checkbox"/> Asian	<input type="checkbox"/> White
<input type="checkbox"/> Native Hawaiian or Pacific	<input type="checkbox"/> Other
<input type="checkbox"/> Not Applicable	
Ethnicity (optional)	
<input type="checkbox"/> Hispanic	Primary Language
<input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> English
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Spanish
	<input type="checkbox"/> Other _____
	(please specify)

Last Name (Legal Guardian)	First Name (Legal Guardian)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
----------------------------	-----------------------------	---

Relationship to Child	(Select)
<input type="checkbox"/> Father	<input type="checkbox"/> Biological
<input type="checkbox"/> Mother	<input type="checkbox"/> Foster
<input type="checkbox"/> Guardian	<input type="checkbox"/> Adoptive
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
(please specify)	(please specify)

Role
<input type="checkbox"/> Primary Guardian <input type="checkbox"/> Legal Guardian

<input type="checkbox"/> Secondary Guardian	<input type="checkbox"/> Other _____ (please specify)
---	--

Household (Family) Size								
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> _____

Household Income (required) check box:		
<input type="checkbox"/> Less Than \$5,000	<input type="checkbox"/> \$5,001 - \$10,000	<input type="checkbox"/> \$10,001 - \$15,000
<input type="checkbox"/> \$15,001 - \$20,000	<input type="checkbox"/> \$20,001 - \$25,000	<input type="checkbox"/> \$25,001 - \$30,000
<input type="checkbox"/> \$30,001 - \$35,000	<input type="checkbox"/> \$35,001 - \$40,000	<input type="checkbox"/> \$40,001 - \$45,000
<input type="checkbox"/> \$45,001 - \$50,000	<input type="checkbox"/> \$50,001 - \$60,000	<input type="checkbox"/> \$60,001 - \$70,000
<input type="checkbox"/> \$70,001 - \$100,000	<input type="checkbox"/> More Than \$100,000	

2018 Federal Poverty Level Guidelines

300%			
Family Size	Annual	Monthly	Weekly
1	\$36,420	\$3,035	\$700
2	\$49,380	\$4,115	\$950
3	\$62,340	\$5,195	\$1,199
4	\$75,300	\$6,275	\$1,448
5	\$88,260	\$7,355	\$1,697
6	\$101,220	\$8,435	\$1,947
7	\$114,180	\$9,515	\$2,196
8	\$127,140	\$10,595	\$2,445
Each Add'l	\$12,960	\$1,080	\$249

Actual Annual Verified Gross Household (Family) Income: \$ _____

(Attach copies of documents used to verify income prior to enrollment)

Family income is at or below 300% of federal poverty level (required risk factor). Consider all sources of income. See **Federal Poverty Level Guidelines** relative to family size (must be verified prior to enrollment).

Other Child Eligibility Risk Factor Criterion (Must check all that apply):

<input type="checkbox"/>	Behavioral Supports: A child who was referred to PA Pre-K Counts from an appropriately credentialed health or mental health practitioner who is not employed by the PA Pre-K Counts program; a child who is receiving mental health treatment. Additional verification beyond the interview is required.
<input type="checkbox"/>	Child Protective Services: A child who is a foster child, a kinship care child or receiving Children and Youth services.
<input type="checkbox"/>	Education Level of Guardian: Does not have high school diploma or GED or post-secondary degree.
<input type="checkbox"/>	English Language Learner: A child whose first language is not English and who is in the process of learning English is considered an English Language Learner.

<input type="checkbox"/>	Individualized Education Plan (IEP): A child who is currently enrolled in the Preschool Early Intervention program with an active IEP. Verification would be a copy of the IEP or other source of documentation from the parent or Early Intervention provider.
<input type="checkbox"/>	Incarcerated Parent: A child for whom one of the child's parents is currently in prison.
<input type="checkbox"/>	Homeless: A child who lacks a fixed, regular, and adequate nighttime residence due to one of the following: A. Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, or camping grounds due to lack of alternate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; B. Children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; C. Children who are living in cars, parks, public places, abandoned buildings, substandard housing, bus or train stations, or similar settings.
<input type="checkbox"/>	Migrant (Non-Immigrant)/Seasonal Student: A migrant child has moved from one school district to another in order to accompany or to join a migrant parent or guardian, who is a migratory worker or migratory fisher, within the preceding 36 months, in order to obtain temporary or seasonal employment in qualifying agricultural or fishing work including agri-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
<input type="checkbox"/>	Teen Mother: A child whose mother was under the age of 18 when the child was born.

Previous Pre-School Experience

Has your child previously attended pre-school? ____ Yes ____ No

If yes, what is the name of the pre-school he/she attended: _____

Transportation

Will you be able to provide transportation to and from the Pre-K Counts Program for every school day?

____ Yes ____ No

To the best of my knowledge, the information provided is accurate. I understand that I may be asked to verify or substantiate information provided.

Parent/Guardian (Signature)

Date

Parent/Guardian Name (Print Name)

Staff Verifying Income and Risk Factors (Signature)

Date

Staff Verifying Income and Risk Factors (Print Name)

STATUS OF NATURAL PARENTS:

Married Divorced Separated Other _____

In a divorce/separation situation, is there a custody order available? Yes* No

*If yes, a copy of the most recent Court Order must be given to the school office.

In a divorce/separation situation, guardianship is granted to _____

In a divorce/separation situation, who should receive paperwork? _____

Child Custody Information

If child custody arrangements are part of your family structure, you need to be aware of our policies in the area:

- Copies of current custody order must be on file at Governor Mifflin School District.
- In the absence of a custody order, the school assumes shared custody, which allows both parents be involved in their child's education.
- Both parents, regardless of custody arrangements, have access to their child's records unless a order specifically prohibits access.
- The parent of record is the parent with whom the child resides.
- The parent of record must live in the Governor Mifflin School District.
- Enforcement of Custody Orders is a police responsibility, not one for the school.

FAMILY INFORMATION

(List any other persons living in the house i.e. brothers, sisters, step-children, other relatives, etc.)

<u>Name</u>	<u>DOB</u>	<u>Relationship</u>	<u>Grade</u>	<u>School</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Note: Only a legal parent/guardian signature will be accepted.

I certify that the information is accurate and that, if it applies, I understand the child custody policy.

Parent Signature

Date