

## Registration for Pre-K

Pre-K Student Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

(Please print)

Parent(s) Name: \_\_\_\_\_

Parent Address: \_\_\_\_\_ Zip \_\_\_\_\_

School for Pre-K: \_\_\_\_\_

Completed Packet received by: \_\_\_\_\_ Date \_\_\_\_\_ Time: \_\_\_\_\_

(Initials)

**IN ADDITION TO THE COMPLETED SCHOOL DISTRICT REGISTRATION FORMS, THE FOLLOWING DOCUMENTS ARE REQUIRED FOR REGISTRATION:**

**1. PROOF OF CHILD'S AGE (acceptable documentation includes):**

- a. Original or copy of Birth Certificate
- b. Original or copy of Baptismal certificate (showing date of birth)
- c. Valid Passport
- d. Green Card

**2. IMMUNIZATIONS REQUIRED BY LAW (acceptable documentation includes):**

- a. The child's original immunization record
- b. Immunization record from former school district or medical office

**Additional Health Requirement for PreK: Physical and Dental Exams**

**3. PARENT'S PHOTO IDENTIFICATION (acceptable documentation includes):**

- a. Valid Driver's License
- b. Penn-DOT Identification Card
- c. Valid Passport
- d. Permanent Resident Card (Green Card)

**4. PROOF OF RESIDENCY – TWO REQUIRED (acceptable documentation includes):**

- a. A dated deed, lease, sales agreement, mortgage information
- b. Recent utility bill, credit card bill, property tax bill
- c. Recently dated vehicle registration or vehicle insurance card
- d. If residing with a district property owner/resident, the district property owner/resident must be present, prove their residency as stated above and sign a notarized "Multiple Occupancy Form."

**BOTH PARTIES MUST HAVE A VALID DRIVER'S LICENSE OR STATE ISSUED PHOTO ID TO FILL OUT A MULTIPLE OCCUPANCY FORM TO BE NOTARIZED IN OUR OFFICE. MULTIPLE OCCUPANCY FORM CANNOT BE COMPLETED IF EITHER PARTY HAS AN EXPIRED ID**

**5. COMPLETED PRE-K COUNTS ENROLLEE APPLICATION/INFORMATION PACKET**

Please bring the following documents with you:

**Proof of income** (Acceptable documentation includes)

- Payroll documentation for two consecutive pay periods
- One monthly statement of income
- One W2 or income tax statement

**Child's Social Security Card**

# Pre-K Counts Enrollee Application/Information



**All parts of this form must be completed entirely – please complete and return with the Erie’s Public School District Registration Packet**

Documentation attached to this information is **confidential** and will not be used for purposes other than enrollment in the Pre-K Program.

## Child’s Demographic Information:

First: \_\_\_\_\_ MI: \_\_\_\_ Last: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Female  Male

Child’s Social Security Number: \_\_\_\_\_

Ethnicity:  Hispanic  Non-Hispanic

Primary Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White
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English is child’s first language:  Yes  No

Language spoken in the home:  
 English  Non-English \_\_\_\_\_  
(Please specify)

Multi-lingual \_\_\_\_\_  
(Please specify)

## Primary Guardian (Guardian 1):

First: \_\_\_\_\_ MI: \_\_\_\_ Last: \_\_\_\_\_

Relationship to Child:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

### Family Type:

One Parent                      Two Parent                      Foster                      Child Living with Relative

Other \_\_\_\_\_  
(Please specify)

Phone Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: PA Zip Code: \_\_\_\_\_ Email address: \_\_\_\_\_

School District of Residence: \_\_\_\_\_

## Guardian 1:

Education Status of Guardian 1: <input type="checkbox"/> Up to 8 <sup>th</sup> Grade <input type="checkbox"/> 9 <sup>th</sup> to 11 <sup>th</sup> Grade <input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> Vocational or Technical Program after High School <input type="checkbox"/> Some College <input type="checkbox"/> Associates Degree <input type="checkbox"/> Bachelor’s Degree <input type="checkbox"/> Graduate/Professional School <input type="checkbox"/> Unknown	Employment Status of Guardian 1: <input type="checkbox"/> Employed Full-time (30 hours/week and over) <input type="checkbox"/> Employed Part-time (fewer than 30 hours/week) <input type="checkbox"/> Multiple Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> Student or Job Trainee <input type="checkbox"/> Unemployed
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**Primary Guardian (Guardian 2):**

First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Relationship to Child:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

**Guardian 2:**

<p>Education Status of Guardian 2:</p> <p><input type="checkbox"/> Up to 8<sup>th</sup> Grade</p> <p><input type="checkbox"/> 9<sup>th</sup> to 11<sup>th</sup> Grade</p> <p><input type="checkbox"/> High School Diploma <input type="checkbox"/> GED</p> <p><input type="checkbox"/> Vocational or Technical Program after High School</p> <p><input type="checkbox"/> Some College</p> <p><input type="checkbox"/> Associates Degree</p> <p><input type="checkbox"/> Bachelor's Degree</p> <p><input type="checkbox"/> Graduate/Professional School</p> <p><input type="checkbox"/> Unknown</p>	<p>Employment Status of Guardian 2:</p> <p><input type="checkbox"/> Employed Full-time (30 hours/week and over)</p> <p><input type="checkbox"/> Employed Part-time (fewer than 30 hours/week)</p> <p><input type="checkbox"/> Multiple Part-time</p> <p><input type="checkbox"/> Seasonal</p> <p><input type="checkbox"/> Student or Job Trainee</p> <p><input type="checkbox"/> Unemployed</p>
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Highest level of education of Birth Mother if not primary or secondary guardian:

- Up to 8<sup>th</sup> Grade
- 9<sup>th</sup> to 11<sup>th</sup> Grade
- High School Diploma  GED  Vocational or Technical Program after High School
- Some College
- Associates Degree
- Bachelor's Degree
- Graduate/Professional School
- Unknown

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**Risk Factors**

- Family income is **at or below 300% of federal poverty level** (Required Risk factor). Consider all sources of income. See next page of document for income chart relative to family size. (Must be verified prior to enrollment)

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**Other Child Eligibility Risk Factor Criterion (Check all that apply)**

- 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.
- Child Protective Services:** A child who is a foster child, a kinship care child or receiving Children and Youth services
- Education level of guardian:** does not have a high school diploma or GED or post-secondary degree.
- 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.
- 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 the lack of alternative 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 spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- Incarcerated Parent:** A child for whom one of the child's parents is currently in prison

- 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.
- Migrant/Seasonal Student (non-immigrant).** 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 agricultural-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
- Teen mother:** A child whose mother was under the age of 18 when the child was born.

**Household Income:**

**Two consecutive pay stubs or W2** for each working family member part of the household and proof of any other monthly income, if applicable

- Less than \$5,000     \$5,001 - \$10,000     \$10,001 – \$15,000
- \$15,001 - \$20,000     \$20,001 - \$25,000     \$25,001 - \$30,000
- \$30,001 - \$35,000     \$35,001 - \$40,000     \$40,001 - \$45,000
- \$45,001 - \$50,000     \$50,001 - \$60,000     \$60,001 - \$70,000
- \$70,001 - \$100,000     More than \$100,000

**2018 Federal Poverty level Guidelines**

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

**Actual Annual Verified Gross Household (Family) Income:** \_\_\_\_\_

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

\_\_\_\_\_  
Staff Verifying Income, Risk Factors and Consent Forms - Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Verifying Income, Risk Factors and Consent Forms - Please Print

**Parent/Guardian Consent Form**

Child's Name: \_\_\_\_\_

Parent/Guardian initials are **required** for each item below to indicate consent/agreement. I agree to allow Erie's Public Schools to:

- \_\_\_\_\_ Make files accessible to those parties working with my child and to state officials for licensing purposes.
- \_\_\_\_\_ Photograph/videotape my child for newspaper/TV media for public display.
- \_\_\_\_\_ Refuse to release my child to anyone not listed on the emergency form without confirmed parental permission.
- \_\_\_\_\_ Reserve the right to refuse to release children to any person who appears to be under the influence of any substance, legal or illegal, which appears to impair the judgment of that person. Erie's Public Schools will notify the proper authorities for the protection of the child.
- \_\_\_\_\_ Post my child's allergy and/or medication log for staff use.
- \_\_\_\_\_ Give my contact information to a partner Pre-K site if my child is on a waitlist. (This may provide an opportunity for your child to attend an agency-based Pre-K program.)

**If there are any legal documents pertaining to the child, such as custody papers, restraining orders or adoption papers that are necessary for Erie's Public Schools Staff, please provide a copy for our records.**

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Please answer the following questions. This will help us to know your child better. Please add any information you feel is relevant to help us develop a more nurturing, educational environment for your child.

Who lives at home with your child? (i.e. siblings, grandparents, cousins) \_\_\_\_\_

What is the total number of people living in the home? \_\_\_\_\_

How does your child respond when he/she is angry or upset? \_\_\_\_\_

How well does your child adjust to new people/surroundings? \_\_\_\_\_

How often does your child play with other children their age? \_\_\_\_\_

My child's favorite activities are: \_\_\_\_\_

My child seems to be very good at: \_\_\_\_\_

My child seems to struggle with: \_\_\_\_\_

Any allergies/medical concerns: \_\_\_\_\_

Food concerns: \_\_\_\_\_

Toileting: Is your child toilet trained?  Yes  No **(This is expected before school begins.)**

Is there any other information you would like us to know? \_\_\_\_\_

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Please sign below to: 1) confirm that the contents of this packet are complete and accurate, and 2) acknowledge receipt of the **Inclusion Procedures for PreK Counts**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date