

CRESTWOOD SCHOOL DISTRICT PRE- K COUNTS PROGRAM

We are currently accepting applications for 2018-2019 ENROLLMENT

Income Verification is Required.

Residents of Crestwood and the surrounding areas are highly encouraged to apply. Participating families **must have a total income at or below 300%** of the Federal Poverty level to be eligible. Please see the table below for the guidelines.

2018 Federal Poverty Level Guidelines

Family Size	Annual	Monthly
1	\$36,420	\$3035
2	\$49,380	\$4115
3	\$62,340	\$5195
4	\$75,300	\$6275
5	\$88,260	\$7355
6	\$101,220	\$8435
7	\$114,180	\$9515
8	\$127,140	\$10,595
9	\$140,100	\$11,675
10	\$153,060	\$12,755



Application Instructions

Please complete the attached **application form** and return it with **all required documentation** to your building principal, as soon as possible. **Acceptance into the program is not considered until the application and all supporting documents have been received.**

Families will be notified of accepted enrollment.

Questions about the Pre-K Program can be directed to:
Joe Delluso, Rice Elementary Principal
57-868-3161
joseph.delluso@csdcomets.org

Please submit copies of the items listed below with your Pre K Counts application:

_____ Documents to verify income for all adults (18 & over) residing in your household **MAY** include, as applicable: **At least ONE ITEM IS REQUIRED**

- _____ 2017 Federal Income Tax Return
- _____ W-2 forms, pay stubs (one which indicates year to date, or 3 separate pay stubs), employer’s verification letter or self–employed business records
- _____ Letter or bank statement detailing social security benefit, disability documentation, unemployment compensation or any unearned income
- _____ Child support documents from DPW
- _____ Zero income declaration letter

- _____ Birth Certificate (for child)
- _____ Social Security Card or Number on Tax Return (for child)
- _____ Photo ID (for Parent/Guardian)
- _____ Custody Papers (if applicable)

The following items are due immediately upon acceptance into the program and no later than the first day of school. **These forms are due by the first day of school.**

- _____ Immunization Records
- _____ *MOST recent* physical



Does your child have an IEP [] Yes [] No

If your child is receiving early intervention services, please provide a copy .

Special Needs/Concerns related to your child as per the **current** IEP—please fill out completely

Does your child have any current health related issues we need to be made aware of including but not limited to:

Allergies: Please specify _____

Asthma

Diabetes

Other: Please specify _____

Parent/Guardian #1

Name _____ Date of Birth _____

Employment Status (circle one): Full time Part time Unemployed

Address _____

City _____ State: PA Zip Code _____

Telephone Number (primary) _____ (alternate) _____

Email _____

Parent/Guardian #2

Name _____ Date of Birth _____

Employment Status (circle one): Full time Part time Unemployed

Address Same as Above

Address * if different from above _____

City _____ State: PA Zip Code _____

Telephone Number (primary) _____ (alternate) _____

Email _____



Income Requirements

Family income is at or below 300% of the federal poverty level. Amount of annual income from **all** sources for **all** household members \$ _____

Please use resource sheet on page 1, if necessary.

Attach appropriate documentation. This information will be verified prior to enrollment.

Family Type

Single Parent

Legal Guardian

Two Parent

Other _____

Please specify

Foster Parent

Family Members Residing in the Household

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							

Other Eligibility Factors (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: <ul style="list-style-type: none"> 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.

Acknowledgements

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 _____

When necessary to the fulfillment of the Pre-K Counts grant or to enhance services provided to my child or family, I authorize release and sharing of information to:

Crestwood School District

Yes No

I authorize the use of photographs in which my child appears for purposes including, but not limited to newsletters, press releases, and/or brochures.

Yes No

Parent/Guardian signature _____ Date _____

