

**Amelia County
4-Year-Old Pre-Kindergarten Application
2018-2019**

Section A: All blanks in this section must be filled out for consideration.

Person or Referring Agency: _____ Date: _____

Child's Name _____
First
Middle
Last

D.O.B _____ Gender () Male or () Female

Street Address: _____ City/State/Zip _____

Mailing Address: _____ Telephone: _____

Child Lives with: () Mother () Father () Both Parents () Guardian(s) () Stepparent

Mother's Name: _____ Father's Name: _____

Occupation: _____ Occupation: _____

Cell Number: _____ Cell Number: _____

Marital Status: _____ Marital Status: _____

Other(s) living in home: _____

Does your child have any medical problems (i.e., asthma)? Yes No

Please Explain: _____

Have you or any of your children experienced behavioral or academic difficulties (i.e., speech)?

Yes or No Please explain: _____

Primary Language Spoken in Home: ___ English ___ Spanish ___ Other

Section B: Please complete the following required financial information.

This section cannot be left blank.

Names of all Household Members [Include the children in school above]	Age	Earnings from Work Before Deductions Wages, Salaries, Tips, Strike Benefits, Unemployment Compensation, Worker's Compensation, Net Income Self-Owned Business or Farm		Welfare, Child Support, Alimony Public Assistance Payments, Welfare Payments, Alimony/Child Support Payments \$ Amount/How Often	Pensions, Retirement, Social Security Pensions, Supplemental Security Income, Retirement Income, Veteran's Payments, Social Security \$ Amount/How Often	All Other Income Disability Benefits, Cash from Savings, Interest/ Dividends, Income from Estates/Trusts/ Investments, Regular contributions from persons not in the household, Net Royalties/ Annuities/ Net Rental Income, Any Other Income \$ Amount/
		Job 1 \$Amount/How Often	Job 2 \$Amount/How Often	\$Amount/How Often	\$Amount/How Often	\$Amount/How Often
Example: Jane Doe	32	\$ 1,800.00 / 2M	\$ /	\$ /	\$ /	\$ /
1.		\$ /	\$ /	\$ /	\$ /	\$ /
2.		\$ /	\$ /	\$ /	\$ /	\$ /
3.		\$ /	\$ /	\$ /	\$ /	\$ /
4.		\$ /	\$ /	\$ /	\$ /	\$ /
5.		\$ /	\$ /	\$ /	\$ /	\$ /
6.		\$ /	\$ /	\$ /	\$ /	\$ /
7.		\$ /	\$ /	\$ /	\$ /	\$ /
8.		\$ /	\$ /	\$ /	\$ /	\$ /
Total Household Members (children and adults)						

Section C: Please complete the following required information.

Does your child have a current IEP? Yes No

Do you currently meet any of the below criteria for homelessness: Yes No

Homelessness is defined as living in the following places due to a lack of a fixed, regular and adequate nighttime residence.

- * live in an emergency or transitional shelter
- * live in a motel, hotel or campground
- * live in a car, public place, bus or train station, or abandoned building
- * sharing housing with family or friends due to loss of housing or economic hardship

Grade level completed in high school by mother: _____

Grade level completed in high school by father: _____

I give permission for my child to be administered an assessment of their current skill level. I understand this assessment does not mean automatic acceptance into this program.

Parent/Guardian Signature

Date

Please Initial:

_____ Children must be fully potty trained and in control of all bodily fluids for acceptance into the Pre-K program. There are no exceptions to this rule.

_____ Any student whose excessive disruptive behavior disrupts the learning environment of other students may be deemed ineligible to continue participation in the preschool program.

Children must be 4-years-old on or before September 30th of the upcoming school year.

Please return all applications in an envelope to Shannon Coppedge at Amelia Elementary School by March 1, 2018. Applications received after this date may be subject to a wait list. All information will be kept confidential.

The Pre-Kindergarten program is a full day public school program.

Students enrolled in the Head Start program are not eligible for the Pre-Kindergarten program.