

PA PRE-K COUNTS APPLICATION

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

Date form Completed:

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

Child's Date of Birth / /	Age 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	Household (Family) size

Primary Language	Family Type
<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____ (Please specify)	<input type="checkbox"/> One Parent <input type="checkbox"/> Two Parent <input type="checkbox"/> Foster <input type="checkbox"/> Child living with Relative <input type="checkbox"/> Other _____ (Please specify)

Street Address	County	
City	State PA	Zip Code
Home Telephone:	Work Phone:	Email Address:

Household Income (required) check box:

- 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

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.
 (Must be verified prior to enrollment)

Other Child Eligibility Risk Factor Criterion (Must 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 (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.
- Teen mother: A child whose mother was under the age of 18 when the child was born

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 – Please Print

Staff Verifying Income and Risk Factors Signature

Date

Staff Verifying Income - Please Print