RSU #12 - HEAD START PRESCHOOL COLLABORATION

Chelsea Elementary 582-2214 / Palermo Consolidated 993-2352 / Somerville Elementary 549-3261 / Windsor Elementary 445-2356 / Whitefield Elementary 549-5251

APPLICATION FOR PRESCHOOL

Child's Legal Full Name:_____ DOB:_____ Gender:_____

Place of Birth (City/State/Country):_____

Child's Residence Address (what # and road does s/he live on and town?): _____

_____

Child's Race (circle one): American Indian/Alaskan Native White Asian Native Hawaiian/Pacific Islander Black/African American Bi-Racial/Multi-Racial

Hispanic/Latino: Yes__ No__

Child's Primary Language:_____ Primary Language Spoken in Home:_____

Parent/Guardian 1 Name:_____	Parent/Guardian 2 Name:_____
DOB:_____	DOB:_____
Residence Address:_____	Residence Address:_____
Mailing Address:_____	Mailing Address:_____
Town:_____	Town:_____
Lives in same home as child? Yes__ No__	Lives in same home as child? Yes__ No__
Legal Guardian? Yes__ No__ Explain:_____	Legal Guardian? Yes__ No__ Explain:_____
Home Phone:_____ Cell Phone:_____	Home Phone:_____ Cell Phone:_____
Work Phone:_____	Work Phone:_____
Place of Employment:_____	Place of Employment:_____
Email Address:_____	Email Address:_____
Parent/Guardian's Race:_____	Parent/Guardian's Race:_____
Hispanic/Latino: Yes__ No__	Hispanic/Latino: Yes__ No__
Parent/Guardian Highest Education: check one	Parent/Guardian Highest Education: check one
__Some high school	__Some high school
__Graduated high school/GED/HiSET	__Graduated high school/GED/HiSET
__Some college	__Some college
__College Degree	__College Degree
Active Military? Yes__ No__ Veteran? Yes__ No__	Active Military? Yes__ No__ Veteran? Yes__ No__

Names and ages of children residing in the home: _____

_____

_____

Number of all adults in the home:_____

Family Status: Single Parent__ Two Parent Family__ Foster/Kinship Family__ Other:

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Describe living arrangements and/or shared custody for the child: _____

_____

- If there is a court order or custody agreement, please provide a copy of the current court order.

Is child in DHHS custody? Yes__ No__ Name and Phone of DHHS Guardian:_____

- If the child lives in RSU#12 with a legal guardian who is not the parent, a certified copy of the court order appointing the guardian must be attached.
- If a custodial parent/guardian wishes RSU#12 to comply with provisions of a court order restricting access to a child, a certified copy of the court order must be attached.

Will child be picked up and dropped off by the bus at home or at a child care provider? Home__ CC Provider__

Child Care Provider's Name: _____

Street Address:_____ Town:_____

Does child have any health, dietary, behavioral and/or developmental needs? Yes__ No__ If yes, please explain and list names of providers of care and services for your child:_____

_____

_____

Does child currently have an IEP with Child Development Services? Yes__ No__

Does child wear glasses? Yes__ No__ Handed: Right__ Left__

Does the family receive SNAP Benefits? Yes___ No___

Primary Health Coverage (Check one) __Private Insurance __Medicaid/MaineCare __Other

Doctor/Medical Home: _____

Dentist/Dental Home: _____

What is your annual income? __Less than $15,000 __$15,000 to $34,999 __$35,000 to $49,999

__$50,000 to $74,999 __$75,000 to $99,999 __$100,000 or more

Please list one person we may contact to help reach you:

Name:_____ Relationship:_____ Phone:_____

I certify that I live with the child named above at the child's residence address identified above. I understand RSU #12 reserves the right to require 2 forms of proof of residency and I have the burden of proof regarding residency. If this residency changes, I agree to bring it to the immediate attention of my child's school.

Date:_____ Parent/Guardian Signature:_____

Print Full Name:_____

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Preschool collaborative requirements require that we gather income information or documentation of being in foster care or homelessness, over the past 12 months or between January and December for last year. Types/sources of income that support your family may include: Employment, Worker's Comp, Social Security Benefits, Unemployment Benefits, Child Support, TANF, Veteran's Benefits, Other.

The following items must be attached to this application to complete this process

- Certified copy of child's birth certificate (20-A M.R.S.A. Section 6002)
- Immunization records (signed statement from health provider specifying immunizations received, dates, and dosages. Immunization is required for poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella (chicken pox), measles, mumps, and rubella. (20-A M.R.S.A. Section 6352-6359 and Chapter 126 of the Maine Department of Education Rules.). Non-immunized children are not permitted to attend schools unless one of the following conditions is met.
  - You have submitted a signed immunization exemption form or letter indicating waiver for sincere religious belief
  - You have submitted a signed immunization exemption form or letter indicating waiver for philosophical reason
  - You have submitted a signed immunization exemption form or letter indicating waiver for medical reason
- Documentation of income over the past 12 months or between January and December of last year for each parent/guardian in the household, and including any child support received by the household. If the household receives TANF, SNAP or SSI, then documentation for the present month's benefits can be used instead of income information.
- Free and reduced meal form.

Head Start Preschool Collaboration

RSU #12 collaborates with Head Start to provide a quality preschool program. In addition to the public preschool program services, Head Start comprehensive services include:

- A quality learning environment that prepares children for success in kindergarten,
- Enhanced preschool classroom environments,
- Individualized learning plans,
- Referrals, resources and advocacy for medical, dental and mental health services, and
- Comprehensive screenings to identify and support learning and healthy development.

Head Start offers families parent meetings, workshops, family resources and opportunities to make decision about the program and policies.

PARENTS: Please send your completed application to your local Elementary School. They will inform the Head Start program, and you will then be contacted by a Head Start staff person to complete the eligibility paperwork.