

# 2021-2022 Taylor County Schools Universal Pre-K Enrollment Form

State birth certificate obtained:	Y	N
Immunization records:	Y	N
Health Check received:	Y	N
Dental Exam received:	Y	N
Social Security Card:	Y	N

**Student Information:**

Name: \_\_\_\_\_ Gender: Male Female Date of birth: \_\_\_\_\_  
 (First) (Middle) (Last)

Address: \_\_\_\_\_  
 (Street) (City) (Zip Code)

**Directions to Home:**

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**Family Information:**

Parent Information	Parent Information
Name: _____	Name: _____
Address (if different from child's): _____	Address (if different from child's): _____
Home Phone #: _____	Home Phone #: _____
Cell Phone #: _____	Cell Phone #: _____
Employer: _____	Employer: _____
Work Phone #: _____	Work Phone #: _____
Birthday: _____	Birthday: _____
Highest level of education: _____	Highest level of education: _____

Please mark all that apply to your family situation:

Household Language	Ethnicity	Housing
<input type="checkbox"/> English	<input type="checkbox"/> Asian	<input type="checkbox"/> Own
<input type="checkbox"/> Spanish	<input type="checkbox"/> African American	<input type="checkbox"/> Rent
<input type="checkbox"/> French	<input type="checkbox"/> American Indian	<input type="checkbox"/> Share housing
<input type="checkbox"/> German	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Homeless
<input type="checkbox"/> Chinese	<input type="checkbox"/> Hispanic	<input type="checkbox"/> HUD or low income
<input type="checkbox"/> Italian	<input type="checkbox"/> Other: Specify: _____	
<input type="checkbox"/> Korean		
<input type="checkbox"/> Portuguese		
<input type="checkbox"/> Other		

**Income:** Please indicate your Household Income by circling your current yearly income and any services your family receives. This information will help determine funding sources for services.

Services Receiving	Income
<input type="checkbox"/> EHS	<input type="checkbox"/> \$16,910-\$21,983
<input type="checkbox"/> SSI	<input type="checkbox"/> \$21,330-\$27,729
<input type="checkbox"/> TANF	<input type="checkbox"/> \$25,750-\$33,475
<input type="checkbox"/> SSD	<input type="checkbox"/> \$30,170-\$39,221
<input type="checkbox"/> Medicaid/CHIP	<input type="checkbox"/> \$34,590-\$44,967
<input type="checkbox"/> Food Stamps	<input type="checkbox"/> \$39,010-\$50,713
<input type="checkbox"/> Child Support	<input type="checkbox"/> \$43,430-\$56,459
<input type="checkbox"/> Unemployment	
<input type="checkbox"/> Active Military	
<input type="checkbox"/> Disability	
<input type="checkbox"/> No Income	
<input type="checkbox"/> WIC	

**Child lives with:** Both parents    Mother    Father    Joint Custody    Grandparent(s)    Foster Family  
**Total Number in Primary Family** \_\_\_\_\_

**Custody issues?**    Yes    No

If yes, please briefly describe: \_\_\_\_\_

**Medical information:**

Child's primary care physician: \_\_\_\_\_ Child's dentist: \_\_\_\_\_

**Student Residency**

Is your student a resident of Taylor County    \_\_\_ Yes    \_\_\_ No

Is your current address a temporary living arrangement due to loss of housing or economic hardship?    \_\_\_ Yes    \_\_\_ No

**If you answered YES, please select the one which BEST describes your current living arrangements:**

- Temporarily staying with family or friends due to loss of housing or economic hardship.
- Living in motel/hotel due to loss of housing or economic hardship.
- Residing in an emergency shelter or in transitional/supportive housing for the homeless.
- Residing in car, park, abandoned building or substandard housing.
- Residing with someone who does not have legal custody and/or is not the legal parent.

***Child's Educational History:***

<b>Previously enrollment</b>	<b>Special Education</b>	<b>Services Receiving</b>	<b>Immigration Information</b>
Child Care at _____	Child currently has an ___ IFSP ___ IEP	___ speech/language ___ hearing ___ vision ___ gross motor ___ fine motor ___ developmental _____	Born outside of the United States? Yes    No  Age when immigrated?    ___
Head Start at _____			
Other _____			

***Classroom:*** What school district does your child reside in? Starting the 2021-2022 school year, transfers will not be made. You must attend the district in which you reside if you want bus transportation.

\_\_\_\_\_ **Anna Jarvis**  
 \_\_\_\_\_ **Flemington**

\_\_\_\_\_ **Little Feet**  
 \_\_\_\_\_ **West Taylor**

CONFIDENTIALITY STATEMENT: This information is being requested on a voluntary basis. However, some information is required in order to determine eligibility. All information disclosed will be used only by those persons related to the program and who are on a need to know basis.

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE, COMPLETE AND ACCURATE. I AFFIRM THAT MY CHILD MEETS THE RESIDENCE REQUIREMENTS FOR ENROLLMENT IN TAYLOR COUNTY.

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

\_\_\_\_\_  
 Date