



PA Pre-K Counts Application

Please check the location you are applying for:

- Canton
- Northeast Bradford

Date Form Completed:	Completed by:	Relationship to Child:
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Child's Information:

Last Name	First Name	Middle Initial
Street Address	County	
City	State	Zip Code
School District of Residence		
Child's Date of Birth	Age 2 3 4 5	Gender Male Female
Race <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Pacific <input type="checkbox"/> American Indian or Alaskan <input type="checkbox"/> White <input type="checkbox"/> Other _____ (please specify)	Ethnicity <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown	Primary Language <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____ (please specify)

Parent/Legal Guardian Information:

Last Name	First Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address	County	
City	State	Zip Code
School District of Residence		
Home Phone:	Work Phone:	Email Address:
Relationship to Child: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Grandparent <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____ (please specify)	Select: <input type="checkbox"/> Biological <input type="checkbox"/> Foster <input type="checkbox"/> Adoptive <input type="checkbox"/> Step Parent <input type="checkbox"/> Other _____ (please specify)	Role: <input type="checkbox"/> Primary Guardian <input type="checkbox"/> Secondary Guardian <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Caregiver <input type="checkbox"/> Other _____ (please specify)

Household (family) size: 1 2 3 4 5 6 Other: _____ (Please Specify)

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 Child Eligibility Risk Factor Criterion (Must 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"/>	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 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"/>	Incarcerated Parent: A child for whom one of the child's parents is currently in prison.
<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"/>	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 (Print Name)

Staff Verifying Income and Risk Factors (Signature)

Date

Staff Verifying Income and Risk Factors (Print Name)

You will be asked to provide written documentation to verify your income if you receive a slot with Pre-K Counts. The information you have provided will be evaluated and applicants will be ranked according to the needs assessment criteria pre-determined by Pre-K Counts guidelines. A member of the BLAST Pre K team will then contact you with information regarding your eligibility and or selection into the program. For those who have qualified for the program a visit and orientation will be scheduled to explain the program and paperwork necessary to start your child on the road to school readiness.

For Office Use Only:	
Actual Annual Verified Gross Household (Family) Income: <i>(Attach copies of documents used to verify income prior to enrollment)</i>	\$
<input type="checkbox"/> Family income is at or below 300% of federal poverty level (required risk factor). Consider all sources of income. See Federal Poverty Level Guidelines relative to family size (must be verified prior to enrollment).	

2016 Federal Poverty Level Guidelines

Family Size	300 Percent of Poverty	Family Size	300 Percent of Poverty
1	\$35,640	5	\$85,320
2	\$48,060	6	\$97,740
3	\$60,480	7	\$110,190
4	\$72,900	8	\$122,670
<i>Each additional</i>	\$12,480		

Early Childhood Outcomes ID Number:

Return completed application and proof of income (tax return, pay stub, or W-2) to:

Maria Pierce, Pre K Counts Supervisor
2400 Reach Road
PO Box 3609
Williamsport, PA 17701

OR

Fax your completed application to:
BLaST IU #17
Attn: Maria Pierce
570-323-1738

You can also drop off your complete application to one of our sites:

Canton Elementary
545 East Main Street
Canton, PA 17724

Northeast Bradford Elementary
210 Panther Lane
Rome, PA 18837