

2018-2019 Preschool Application

Please complete the form completely and legibly to ensure accurate processing.

Child Information

Check here if your family is experiencing homelessness.
(Not sure? See definition on the next page)

<input type="text"/> Last Name	<input type="text"/> First Name	<input type="text"/> Date of Birth (MM/DD/YYYY)
Race: <input type="checkbox"/> Native American Indian or Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Pacific Islander or Hawaiian <input type="checkbox"/> Other	Is the child Hispanic/Latino? <input type="checkbox"/> Yes <input type="checkbox"/> No Is this child a foster child? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Male <input type="checkbox"/> Female Check all that apply: <input type="checkbox"/> IEP/504 <input type="checkbox"/> Limited English <input type="checkbox"/> Medical Concern _____ <i>(describe)</i>

Adult Information

ADULT 1: Legal Guardian of Child (If parent, name must appear on birth certificate. If other than parent, custody papers are required.)

<input type="text"/> Name (Last, First)	<input type="text"/> Phone Number
<input type="text"/> Address	<input type="text"/> City/State/Zip
<input type="text"/> Apt. #	

Proof of Residence

Lease/Mortgage

LIPH Resident Worksheet

Utility Bill

Notarized Letter
(Please see next page for explanation of when a notarized letter is accepted)

Relationship to Child:

Biological Parent (Proof of Income required; Name must be on Birth Certificate)
 Unemployed/Stay-at-Home Parent (**MUST complete attached Unemployment Verification Form**)

Legal Guardian (Custody papers required; No Proof of Income needed)

Foster Parent (Court Order required; No Proof of Income needed)

ADULT 2 (if applicable): This adult is a biological parent living in the home. No other adults should be included. **Proof of Income required** (If you are unemployed or a sta-at-home parent, please complete the attached Unemployment/ Stay-at-Home Parent Verification Form.)

<input type="text"/> Name (Last, First)	<input type="text"/> Phone Number	<input type="checkbox"/> Biological Mother <input type="checkbox"/> Biological Father
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Check all that apply:

<input type="checkbox"/> Substance Abuse by Parent	<input type="checkbox"/> Parents did not complete high school	<input type="checkbox"/> Single Parent Home
<input type="checkbox"/> Domestic Violence	<input type="checkbox"/> Parent Incarceration	<input type="checkbox"/> Active Military
<input type="checkbox"/> Child has an IEP	<input type="checkbox"/> Parent(s) were teenagers at time of childbirth	<input type="checkbox"/> Child in speech therapy

Household Information

Please list above child's brothers/sisters **WHO LIVE IN THE HOME** (18 and under only).

Name	Age	Current School
1.		
2.		
3.		
4.		
5.		

HEADSTART: If you are interested in being contacted by Headstart for possible enrollment in their preschool program, please check the box below.

The submission of this form to the Office of Early Learning/Title I indicates your desire for your child to be considered for enrollment in one of Norfolk Public Schools' preschool programs. By checking the Headstart box above, you authorize Norfolk Public Schools and Head Start/Office of Human Affairs to share the above information as part of the eligibility determination process. Your signature also indicates that the information provided is accurate to the best of your knowledge. Applications received without the proper supporting documents will not be processed. Acceptance into preschool is NOT first come, first serve; rather, it is determined by grant eligibility requirements.

Parent Signature/Date

Please proceed to Page 2 to complete the application process.

Office Use ONLY

ZONE SCHOOL _____ / _____

THREE FOUR

Document WORKSHEET – please complete

This worksheet is designed to help you determine what supporting documentation you will need to send in with the application. **Please DO NOT send original documents – copies only.** Failure to include all documentation will result in an incomplete application. *Incomplete applications WILL NOT be processed.*

Proof of Residence: All perspective preschool students MUST reside within the city of Norfolk. The following guidelines will help you determine what you need for proof of residence:

- If you are a resident of Norfolk Redevelopment and Housing Authority (NRHA), you can use your LIPH Resident Worksheet as proof of both residence and income.
- All leases/mortgages/utility bills must be in either Adult 1 or Adult 2's name.
- Utility bills include electric, water/sewage, trash, gas. It DOES NOT include phone or cable bills.
- Paystubs, DMV mail, and other mailings cannot substitute for the accepted forms of proof.
- **NOTARIZED LETTERS:** In the event that Adult 1 and 2 reside with friends or family and do not have any of the accepted proofs of residence in their name, use the attached notarized letter template.
- **HOMELESSNESS:** You may meet the definition of homeless if you are living in a motel or other non-permanent housing, doubled up with friends/family due to economic hardship, living in a shelter, or are living in an outdoor or public area.

Proof of Residence

- Lease/Mortgage
- LIPH Resident Worksheet
- Utility Bill
- Notarized Letter

Proof of Income: All three of Norfolk Public Schools' preschool programs are funded through grants and state funds. These programs place emphasis on serving students most in need of early learning opportunities. As part of the overall determination process, income information is collected. Please note the following:

- Income information is required for both Adult 1 and Adult 2 except in the cases of foster care or legal guardianship (court orders required in these cases).
- If you do not receive a traditional paystub, please complete the attached Employment Verification Form and have your employer sign it.
- If either Adult 1 or Adult 2 is unemployed, please complete the attached Unemployment Verification Sheet.
- If Adult 1 and/or Adult 2 receives income such as child support, SSI, or TANF in addition to job-related income, these **must** be provided as part of the proof of income.
- Note: Although proof of income is required, employment does not make your child ineligible for this program. Determining income eligibility is formula-driven and based on both income and household size.

Proof of Income (check all those that are included with the application)

- Pay Stubs (most recent)
- Employment Verification Form
- W2s or 1040
- Unemployment Benefits Statement
- SSI Statement
- TANF Statement
- Child Support Statement
- LIPH Resident Worksheet

Birth Certificate: Please provide a COPY of your child's birth certificate as part of the application packet.

- We cannot accept Birth Letters as a substitute.
- Children born in other countries can submit a birth certificate from that country or a passport as proof of age.

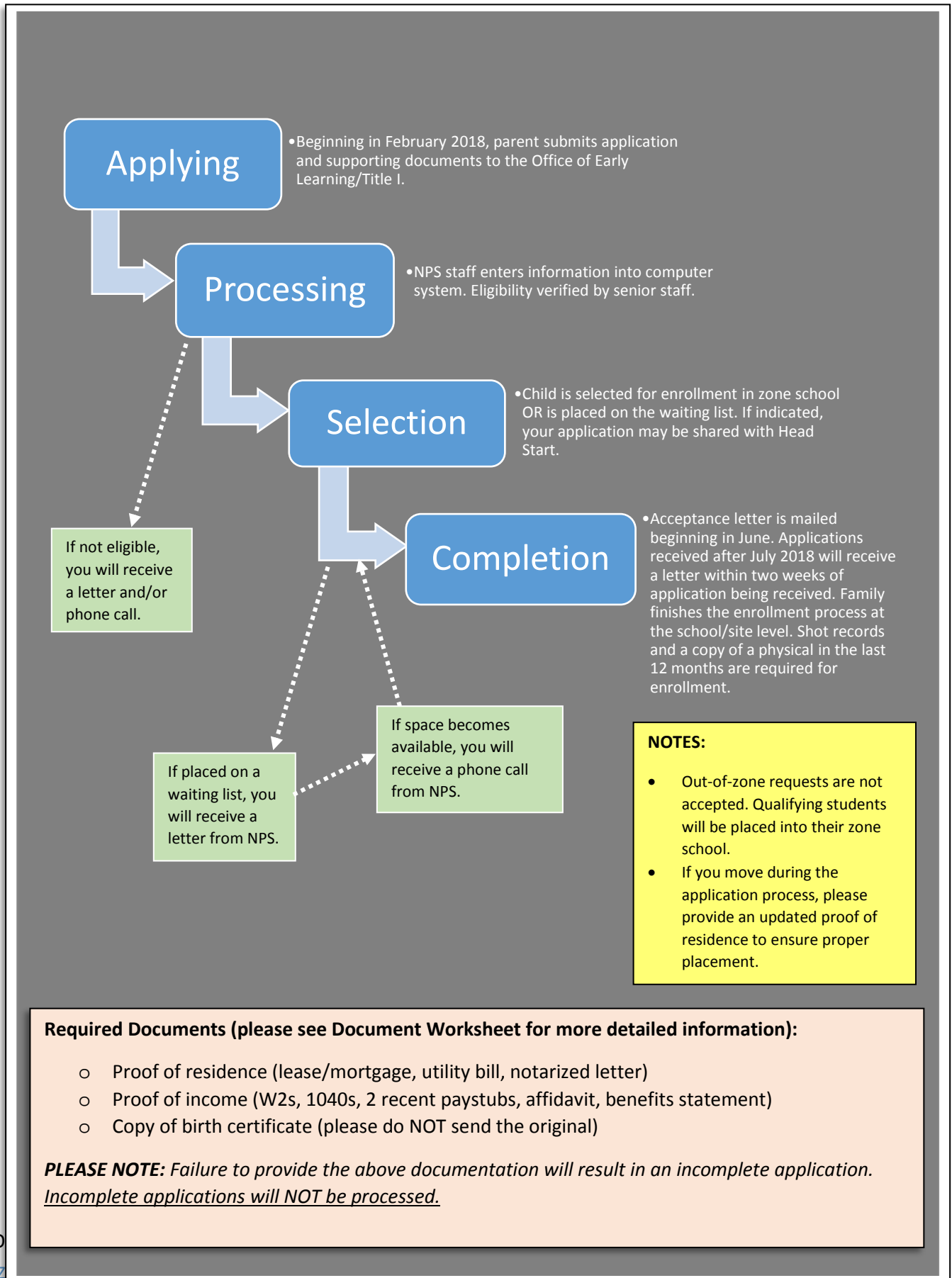
Proof of Age

- Birth Certificate

Please mail or email this form and the required paperwork to: Office of Early Learning/Title I
 800 E. City Hall Ave. Suite 709
 Norfolk, VA 23510
 preschool@nps.k12.va.us

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Unemployment/Stay-at-Home Parent Verification Form

(ONLY to be filled out if you are unemployed.)

Name: _____

Child's Name: _____

Address: _____

Telephone: _____

I certify that I am unemployed. I understand that with this preschool application, I should submit my unemployment statement/weekly benefits statement and proof of any other income that I receive (i.e. child support, SSI, disability).

Signature

Date

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Employment Verification Form

(ONLY to be filled out if you ARE employed, but do NOT have a paystub or other proof of income.)

Part I for Employee to Complete

Name: _____

Child's Name: _____

Address: _____

Telephone: _____

Part II Employer to Complete (only to be completed if employee *does not* receive paystubs)

1. _____ works for me _____ hours per week.

Type of work _____

2. This employee is paid: weekly biweekly (26 times a year)
 monthly semi-monthly (24 times a year)

3. How much does employee earn hourly? _____

4. Does this employee work less than 52 weeks a year? Yes No

If yes, how many weeks per year does this employee work? _____

Employer's name: _____

Please print name

Employer's signature: _____

Date

Company or organization name: _____

Address: _____

Telephone number: _____

Leaseholder/Homeowner Affidavit

(ONLY to be filled out if you reside with friends or family and do not have any of the accepted proofs of residence in your name)

I hereby affirm or swear that the adult(s) listed below and their children live in my residence at the following address:

Street Address	Apartment Number
City, State, Zip Code	

(Property deed, lease, or utility bill must accompany this affidavit.)

Name of Parent/Guardian: _____

Name of Children: _____

I understand that enrollment of the students named above is based on my statement and that if this statement is false, my child may be withdrawn from the program. I also agree to notify the school principal of any change in the residency of the above-named students within three days of such change.

Printed Name of Homeowner/Leaseholder Phone Number

Signature Date

Notary: Please ensure that the Homeowner/Leaseholder provided a copy of the current mortgage/lease or a utility bill (electric, water, sewer, gas ONLY) as proof of residence.

Subscribed and sworn before me this _____ day of _____, 20____.

State: _____ County: _____. My commission expires on _____.

Witness my hand in official seal.

Notary Public