

Note: All elements of this form are required for eligibility for the Virginia Preschool Initiative (VPI) program as part of item 136 C.14. d.1 of Chapter 665 of the 2015 Virginia General Assembly budget. All information will be used for eligibility and reporting purposes only. Failure to report all information fully and accurately will result in your child being removed from consideration for the pre-kindergarten program in Nottoway County Public Schools.

Child's Name: _____
Last First Middle

Gender (circle one): Male Female **DOB** ____/____/____

Parent/Guardian's Name: _____

Street and/or Mailing Address: _____

City/Town: _____ **State:** _____ **Zip:** _____

Telephone: Home (____) _____ Cell (____) _____ Work (____) _____

EDUCATION—Highest Grade by caregiver, parents, and/or guardian

Currently attending school ____ Degreed (Bachelors/Higher) ____ GED ____
High School graduate ____ College not completed ____

FAMILY INFORMATION

The child is being raised by: ____ Single birth parent ____ Grandparent/Foster ____ Two-parent family ____ Parent/adoption ____

The caregiver's home is or has experienced:

Violence ____ Prolonged Illness ____ Legal Incarceration ____

Military Deployment ____ Separation/Divorce ____

Unemployment ____ Death (parent/sibling) ____

Family Experiencing Homelessness? ____ Yes No ____ If yes please complete Homeless application.

CHILD HISTORY—The child has the following health or developmental concerns:

Note: Please attach any documentation or explanation of items marked.

IEP/IFSP for _____

Developmentally delayed ____ Speech/language problems ____

Severe health problems ____ Weight of child at birth – 5 lbs or below ____

Limited English Proficiency ____ Hearing/Vision Problems ____

Currently receiving speech services ____ If yes, where _____

INCOME—Caregiver's home is receiving:

SNAP ____

TANF (Temporary Assistance for Needy Families) ____ WIC ____ Medicare/Medicaid ____

Social Security/SSI ____ FAMIS ____

Number of children in household under 18 years of age: ____

Total number of Persons (including children, parents/guardians and any others supported by the parent/guardian) in household: ____

Parent/Guardian Employment Status

Both Parents/Guardians Employed ____ Two Parents/Guardians and only one employed ____

Both Parents/Guardians Unemployed ____

Yearly household income: \$ _____

(Please include all salaries, tips, unemployment, workman's compensation, social security, and pensions)

Primary Language Spoken at Home: English ____ Other ____ (Please list) _____

If yes, list: _____

Thank you for applying for our Prekindergarten Program. You will be notified regarding your child's acceptance or waiting list status. Completing the application does not place your child into the program. Space is limited. Therefore, students will be placed according to their at-risk needs.

Parent/Guardian's Signature: _____ **Date:** _____

Requirements for Enrollment

A child must be four (4) years of age on or before September 30 of the year he/she enrolls to be eligible for pre-kindergarten for that school year. Return this form to the school the child will attend. If you have any questions about pre-kindergarten registration, please contact the school your child will attend: (Burkeville Elementary- 767-5236, Blackstone Primary- 292-5300).

- 1) **Proof of Residency (Parent or guardian must provide documentation of physical residence within the county. Examples of appropriate documentation would be a current utility bill, lease/renter's agreement, mortgage statement, etc...).**
- 2) **Birth Certificate (An official certified copy of the child's birth record must be provided)**
- 3) **School Entrance Health Form Immunization Record (Parent or guardian must provide a record of immunizations by the end of June. This may be an attachment to the state physical form.)**
- 4) **School Entrance Health Form Physical Examination (Parent or guardian must provide documentation that the student has received a medical physical within 365 days of the start of the 2016-17 school year. This record must be provided on or before the FIRST DAY OF SCHOOL.)**

Notes: The Nottoway County Health Department will be offering pre-school physicals. Please contact the Nottoway County Health Department at 434-645-7175 for an appointment date and time.

If the physical for entrance into the pre-kindergarten program is conducted more than 365 days before the start of kindergarten, the student will be required to have a second physical for entrance into kindergarten.

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