

FORSYTH COUNTY PRE-K APPLICATION CHECKLIST

- All forms are filled out completely
- A copy of the child's birth certificate is attached, CHILDREN MUST BE FOUR (4) by AUGUST 31, 2008
- Documentation of child support payments, *if applicable* (include court order for child support and payments received)
- Documentation of other sources of income including Social Security Income, TANF, Disability or other, *if applicable*
- Income verification for both mother and father are attached
Accepted Verification includes:
 - One month of check stubs OR
 - Most recent tax return or W-2 forms
 - If check stubs or W-2 are not available, a letter from current employer stating the parents hours and wages and length of employment. The letter must be signed by the parent's supervisor

Signatures Required:

- Mother/Stepmother or Legal Guardian Information Sheet (Page 4)
- Father/Stepfather or Legal Guardian Information Sheet (Page 5)
- Non-income Verification Form (*if parent or guardian is unemployed*) (Page 8)
- Permission to Give Developmental Assessment (Page 9)
- Permission to Release Information (Page 10)
- Family Involvement (Page 12)

All applications must be returned to

Smart Start of Forsyth County

7820 North Point Boulevard Winston-Salem, NC 27106

DO NOT FAX APPLICATIONS

FORSYTH COUNTY PRE-KINDERGARTEN APPLICATION

Date of Application

CHILD INFORMATION

Child's Name	First	Middle	Last	
Date of Birth <small>CHILDREN MUST BE FOUR (4) by <u>AUGUST 31st</u></small>	Month	Day	Year	
Social Security Number <small>(If child has a number, please give last four digits only)</small>	XXX-XX- Last four numbers only		Ethnic Background: <input type="checkbox"/> Black/African American <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> White/European America <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Other (Please Specify) _____	
Sex/Gender <small>(Check One Box)</small>	Male	Female		
What is the child's language?	English	Spanish	Other (Please specify)	Does this child speak more than one language? If so, please list all languages below: 1. _____ 2. _____

Is the child living with a parent, relative, or legal guardian? Yes _____ No _____

Specify who the child lives with and relationship to the child: (e.g. mother, father, both parents, mother and stepfather, father and stepmother, grandparent(s), etc.) _____

CHILD'S ADDRESS

Street Address	Apartment #	City	Zip Code

TELL US ABOUT YOUR CHILD

1. Does your child have any chronic or significant health concerns that we should be aware of? If so, please use the space below to tell us about your child's needs.

2. Does your child have any identified special needs (e.g. developmental delay, speech/language, hearing, physical disability, etc.)? If so, does your child have an Individualized Education Plan (IEP) through the Winston Salem Forsyth County Schools Exceptional Children's department? If any of these situations apply to your child, please describe below any services your child is receiving. What agency is delivering these services to your child (school system or private provider)?

3. Has your child ever been enrolled in a childcare center, preschool, or family childcare home? ___yes ___no

4. Is your child currently enrolled in a childcare center, preschool, or family childcare home? ___yes ___no
If yes, please provide the name of the center, preschool or family childcare home that your child is currently attending:

Childcare program name

5. If your child is currently attending a childcare program, do you have a subsidy voucher from DSS or Smart Start?
_____yes _____no

6. Please tell us any other information you would like us to know about your child in the space below. (Optional)

7. Does your child have Medicaid? _____yes _____no

MOTHER/STEP MOTHER or LEGAL GUARDIAN INFORMATION

Mother's Name	First	Middle	Last			
Date of Birth	Month	Day	Year			
Mother's Address	Street Address	Apartment #	City	Zip Code		
Mother's Phone Numbers	Home	Cell Phone	Work Phone			
Mother's Place of Employment				If Mother Is Unemployed, Check This Box		
Mother's Income From Employment	Number of Hours Per Week	Hourly Wage	Total Monthly Income From Employment			
Mother's Income from Other Sources (If Applicable)	Child Support (Monthly)	TANF (Monthly)	Social Security (Monthly)	Unemployment (Monthly)	Disability (Monthly)	Other
What is the Mother's language? (Check all that apply)	English		Spanish	Other (Please specify)		
Mother's Highest Education Level	Grade Level Completed	GED	High School Diploma	Some College	College Degree	
Does This Child Live With You?	Yes	No	Mother's military status: <input type="checkbox"/> Active Duty member of US Armed Forces <input type="checkbox"/> Reserve Unit Member called up for duty w/in last or next 18 months <input type="checkbox"/> Seriously injured or killed while on active duty			

Submitting false information in order to qualify for Pre-K programs constitutes fraud and will result in immediate exclusion from the pre-k program.

I certify that all of the information on this application, and attached verification is true and correct:

Mother's or Legal Guardian Signature _____ Date _____

FATHER/STEP FATHER or LEGAL GUARDIAN INFORMATION

Father's Name	First	Middle	Last			
Date of Birth	Month	Day	Year			
Father's Address	Street Address	Apartment #	City	Zip Code		
Father's Phone Numbers	Home	Cell Phone	Work Phone			
Father's Place of Employment				If Father Is Unemployed, Check This Box		
Father's Income From Employment	Number of Hours Per Week	Hourly Wage	Total Monthly Income From Employment			
Father's Income from Other Sources (If Applicable)	Child Support (Monthly)	TANF (Monthly)	Social Security (Monthly)	Unemployment (Monthly)	Disability (Monthly)	Other
What is the Father's language? (Check all that apply)	English		Spanish	Other (Please specify)		
Father's Highest Education Level	Grade Level Completed	GED	High School Diploma	Some College	College Degree	
Does This Child Live With You?	Yes	No	Father's military status: <input type="checkbox"/> Active Duty member of US Armed Forces <input type="checkbox"/> Reserve Unit Member called up for duty w/in last or next 18 months <input type="checkbox"/> Seriously injured or killed while on active duty			

Submitting false information in order to qualify for Pre-K programs constitutes fraud and will result in immediate exclusion from the pre-k program.

I certify that all of the information on this application, and attached verification is true and correct:

Father's or Legal Guardian Signature _____ Date _____

Alternate Contact Information

**Sometimes phone numbers and addresses change during the months before school starts.
Please provide other contacts to help us get in touch with you if necessary.**

Be sure to let us know if your phone number or address changes by calling 714-4360

Person to contact if parent cannot be reached	Relation:	Home Phone:	Work Phone:	Pager/Cell phone
Person to contact if parent cannot be reached	Relation:	Home Phone:	Work Phone:	Pager/Cell phone
Person to contact if parent cannot be reached	Relation:	Home Phone:	Work Phone:	Pager/Cell phone

IMPORTANT!!!!

NON-INCOME VERIFICATION FORM

If you are currently unemployed, and are not receiving unemployment benefits or other source of regular income, please complete this form

This is to verify that I have provided support to:

Name of person who provides support for this family: _____

Including shelter, food, laundry and incidentals from: From: _____ To: _____
date date

Supporter's signature: _____

Address: _____

Phone number: _____

This is to verify that my children and I have had no income during this time:

From: _____ To: _____
date date

I certify that this information is true. If any part is false, I understand that my child's participation in the program may be terminated and subject to legal action. I also understand that this information will be held in strict confidence within the agency and is accessible to me during normal business hours.

Parent/Guardian Signature: _____ Date: _____

Address: _____ Phone # _____

Child's Name: _____

Notary Public: _____ **Date Notarized:** _____ **Stamp**

PERMISSION TO GIVE DEVELOPMENTAL ASSESSMENT

I _____, give permission for my child _____
(Parent Name) (Child's Name)

to participate in developmental assessments for the purpose of gathering information about my child's developmental/educational needs and evaluating progress during the school year. I understand that this information is confidential and will be shared with pre-k program staff only.

I understand that developmental assessments will become part of my child's cumulative school folder when he/she starts kindergarten.

I understand that this information may be used in addition to other information that I have provided to determine my child's eligibility for enrollment in the Pre-K classroom.

Signed _____ Date _____
(Parent's Signature)

PERMISSION TO RELEASE INFORMATION

Name of Child: _____ Date Of Birth: _____

I, _____, authorize **Smart Start of Forsyth County** to release the following educational records and information:
(Parent/Legal Guardian Name)

- Completed Pre-K Enrollment Application that includes documentation of income, social security number, and birth certificate
- Developmental Assessments (LAP-D, LAP-3, LAP-R, DECA)

To: Winston Salem/Forsyth County Schools 1605 Miller St. Winston Salem, NC 27103
Family Services Head Start 2050 East End Blvd. Winston Salem, NC 27101
Compass Consulting Group, LLC. 5726 Fayetteville Rd. Suite 203, Durham, NC 27713
Frank Porter Graham Child Development Institute, UNC-CH Chapel Hill, NC
Imprints, 502 North Broad St. Winston Salem, NC 27101

for the purpose of:

- Determining Eligibility for State and Federal-funded Pre-K Programs (including More at Four, Title I, and Head Start)
- Evaluation of Pre-K Programs

I, _____, authorize **Winston-Salem/Forsyth County Schools** to release the following educational records and information:
(Parent/Legal Guardian Name)

- Completed Pre-K Enrollment Application that includes documentation of income, social security number, and birth certificate
- Developmental Assessments (LAP-D, LAP-3, LAP-R, DECA)

To: Smart Start of Forsyth County/More at Four Pre-K Program

for the purpose of:

- Determining Eligibility for State and Federal-funded Pre-K Programs (including More at Four, Title I, and Head Start)
- Evaluation of Pre-K Programs

I understand that: (1) I have the right not to consent to the release of my child's educational records; (2) I have the right to receive a copy of such records upon request; (3) and that this consent shall remain in effect until revoked by me, in writing, and delivered to Smart Start of Forsyth County, but that any such revocation shall not affect disclosures previously made by Smart Start of Forsyth County prior to the receipt of any such written revocation.

Signature of Parent or Guardian

Date

THIS INFORMATION RELEASE IS SUBJECT TO THE CONFIDENTIALITY PROVISIONS OF APPROPRIATE STATE AND FEDERAL LAWS AND REGULATIONS WHICH PROHIBIT ANY FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS.

The Pre-K Program

The Pre-K program operates on a schedule similar to the public schools. ***Please note that sites have different hours of operation. Children must be dropped off and picked up on time each day.***

Holidays and snow days follow the schedule for the Winston Salem/Forsyth County Schools. In addition, each class may schedule other teacher workdays when children do not attend, for the purpose of conducting parent meetings, home visits, and/or staff development. Head Start sites follow Family Services Head Start schedule.

All Sites will provide a calendar for parents with schedules, closings and holidays.

Some of the sites offer before and/or after school care and extended care on days when the class is not in session. Enrollment in the Pre-K program does ***not*** mean you are enrolled in extended care ***if offered***. The fees for this service are determined by the site and parents must make arrangements with the center director or principal and case manager (for DSS or Smart Start child care subsidy voucher).

Extended Care is not available at all sites, and fees are charged for this service (where available). Pre-K classes in childcare sites *usually* (not always) offer extended care. Public school sites do not typically offer extended care for pre-k children.

If you have a childcare subsidy voucher from DSS or Smart Start, talk to your case manager about vouchers for extended care. If you give up your voucher, you may be placed on a waiting list to receive financial assistance for extended care fees.

School Uniforms

Some schools require that all children wear school uniforms. Your child's teacher will let you know if school uniforms are required. If you need assistance with this, please talk to your child's teacher.

Transportation

Parents are responsible for providing transportation for their child. Children are not allowed to ride school buses to and from school until they go to kindergarten. However, if transportation is a barrier, please talk with your child's teacher or the parent educator/family worker. They may be able to help you find ways to get your child to and from school.

Permission to Release Information

Smart Start of Forsyth County is the central agency for accepting and processing applications for subsidized pre-kindergarten programs. Each application is reviewed for eligibility among three programs, More at Four, Head Start, and Title I. The Permission to Release Information allows us to send your child's application and assessment information to the program(s) that fund the class. This helps us to place children in locations and programs that best fit the needs of the family based on their eligibility status. Some of the pre-k classes blend funding from one, two, or all three of those programs. When a class has blended funding, it is necessary to share information about your child to meet State and Federal requirements for each program. In addition, all pre-k programs are required to evaluate the programs based on the developmental progress of the children. Compass Consulting and Frank Porter Graham are involved in analyzing and reporting evaluation data from the pre-k classes.

FAMILY INVOLVEMENT

Family involvement is critical to the success of children during the pre-kindergarten year and in subsequent years. Parents or guardians of the children enrolled in the Pre-K classes are *strongly encouraged* to participate in the program. This can be accomplished in several ways, including, but not limited to, the following:

- 1) reading with your child regularly and completing a story sharing log,
- 2) attending parent meetings (you are required to attend at least 2 parent meetings per year)
- 3) attending parent-teacher conferences
- 4) participating in a home visit with the teacher and/or parent educator
- 5) volunteering in the classroom or on field trips
- 6) other parent-child activities as suggested by the teacher or parent educator/family worker
- 7) time spent taking your child for evaluations and/or special services (for example, developmental evaluation, speech, vision, hearing, dental care, etc.)
- 8) parenting classes offered in the community
- 9) kindergarten transition activities (e.g. kindergarten screening and registration, attending open house, etc.)

Talk to your child's teacher or your parent educator so that we can help you find meaningful ways to participate in, and be a part of your child's pre-k experience.

I have read the information regarding extended care, transportation, and family involvement.

Parent's Signature

Date

Information About Locations of Pre-K Sites

Children are assigned to sites by the Pre-K staff; however it would be helpful for us to know which sites would be convenient for you. Some sites are open to all applicants and some sites are limited to children who meet certain criteria.

Children will be assigned to a site based on eligibility, residency, needs of the family, and requirements of the program

In order to help us with placement decisions, please let us know which site(s) might best meet your needs. Please circle any sites on this page that could work for your family.

Site	Address	Phone	Director/Principal
A Great Start (NWDC)	1210 Bolton St. Winston Salem 27103	768-5444	Violet Bone
Bethlehem Community Center Child Development Center	520 Cleveland Ave. Winston Salem 27101	722-6264	Patricia Shouse
NWCDC Franciscan Child Development Center	1208 Hattie Ave. Winston Salem 27105	748-9200	Jennifer Nelson
NWCDC Model City	2530 Pittsburgh Ave. Winston Salem 27105	724-0353	Lois Hicks
Sunshine House	600 E. Polo Rd. Winston Salem 27106	759-0514	Ruth Davis
New Horizons Child Care, Inc	6395 Cephis Dr. Clemmons 27012	766-7079	Charlene DiPietro
Church Child Care Center	4400 Poindexter St. Walkertown 27051	595-4451	Theressa Stevens
Buchanan Head Start	2555 Buchanan St. Winston Salem 27127	785-8741	Doris Vaughns
Family Services Head Start Sarah Y. Austin	2050 East End Blvd. Winston Salem, 27101	727-0617	
Mineral Springs Elementary	4527 Ogburn Ave. Winston Salem 27105	727-0617	Shelia Ebrahim
Kernersville Elementary	512 W. Mountain St. Kernersville 27284	727-0617	

Elementary School Locations

Elementary Schools require that children be assigned according to their residential school. Children who live in the school zone for a particular site will be given preference after all eligible residential children have been placed.

PLEASE TELL US IF YOU HAVE OLDER CHILDREN WHO ARE ENROLLED IN SCHOOL AND WHERE THEY ARE ENROLLED. WE WILL TRY TO PLACE CHILDREN IN SITES WHERE THEY HAVE OLDER BROTHERS AND SISTERS, IF POSSIBLE:

Name Of Brother or Sister	Name Of School Where Brother or Sister Attends
____ Ashley Elementary (Headstart Only) 1647 Ashley School Circle Winston-Salem, NC 27105 Phone: 727-2343	____ Konnoak Elementary Phone:771-4567 3200 Renon Rd. Winston Salem, NC 27127
____ Bolton Elementary 1250 Bolton St. Winston-Salem, NC 27103 Phone: 774-4626	____ Latham Elementary 986 Hutton St. Winston Salem, NC 27101 Phone: 727-2310
____ Cash Elementary 4700 Old Hollow Rd, Kernersville, NC 27284 Phone: 996-3321	____ Middle Fork Elementary 3125 Williston Rd. Walkertown, NC 27051 Phone: 748-4090
____ Cook Elementary 920 11 th St. N.W. Winston Salem, NC 27105 Phone: 727-2784	____ North Hills Elementary 340 Alspaugh Dr. Winston Salem, NC 27105 Phone: 661-4940
____ Diggs Elementary 950 Mock St. Winston Salem, NC 27127 Phone: 727-2424	____ Old Town Elementary 3930 Reynolda Rd. Winston Salem, NC 27106 Phone: 924-2915
____ Easton Elementary 734 E. Clemmons Rd. Winston Salem, NC 27107 Phone: 748-4063	____ Petree Elementary 3815 Old Greensboro Rd. Winston Salem, NC 27101 Phone: 748-3454
____ Forest Park Elementary 2019 Milford St. Winston Salem, NC 27107 Phone: 771-4530	____ Sedge Garden Elementary 475 Sedge Garden Rd. Kernersville, NC 27284 Phone: 771-4545
____ Gibson Elementary 2020 Walker Road Winston-Salem, NC 27106 Phone: 922-6612	____ Sherwood Forest Elementary 1055 Yorkshire Rd. Winston-Salem, NC 27106 Phone: 774-4646
____ Griffith Elementary 1385 Clemmons Rd. Winston Salem, NC 27127 Phone: 771-4544	____ South Fork Elementary 4332 Country Club Rd. Winston Salem, NC 27104 Phone: 774-4664
____ Hall Woodward Elementary 125 Nicholson Rd. Winston Salem, NC 27107 Phone: 771-4550	____ Speas Elementary 2000 W. Polo Rd. Winston Salem, NC 27106 Phone: 774-4699
____ Ibraham Elementary 5036 Old Walkertown Rd. Winston Salem, NC 27105 Phone: 661-4850	____ Walkertown Elementary 2971 Main St. Walkertown, NC 27051 Phone: 595-2311
____ Kimberley Park Elementary 1701 N. Cherry St. Winston Salem, NC 27105 Phone: 727-2116	____ Ward Elementary 3775 Fraternity Church Rd. Winston Salem, NC 27127 Phone: 774-4676