STUDENTS 09.121 AP.21

## **Petition for Early Enrollment Form**

I feel that my child demonstrates the academic achievement, social, emotional, and physical maturity appropriate for kindergarten placement, and should be considered for early placement in kindergarten pursuant KRS 158.030. My child will turn five (5) years old between August 2<sup>nd</sup> and October 1<sup>st</sup>, which does not meet the age requirements established by the Commonwealth of Kentucky.

| CHILD'S NAME   |   |   |   |        |
|--|---|---|---|--------|
| BIRTHDATE:/  | AGE   |   |   |        |
| PARENT NAME (Please Print)   |   |   |   | _      |
| ADDRESS (Please Print)   |   |   |   | _      |
| CITY   | STATE   | ZIP   | COUNTY  |        |
| TELEPHONE NUMBER (Home) _  |   | (Work)  | (Cell)  |        |
| REQUEST PETITION FOR EARLY   | ENROLLMENT FOR  | R WHICH SCHOOL _  |   |        |
| PRESCHOOL EXPERIENCE<br>List the preschools, Head Start,<br>and the approximate number of  |   |   | ended. Include the dates of attenda   | ance   |
| Name of School/Program(s)  | Dates of  | Attendance  | # Hours/Week  |        |
| I understand the following:  • To determine entry into the Kindergarten Readiness So social/emotional inventory interpretation of what the s | kindergarten prog<br>creeners, the <i>Briga</i><br>as a part of the sc<br>creening data mea | ram, my child will nce. I will also be reening process. T | be screened using the Kentucky  | —<br>е |
| success, will be shared with   |   | roxad:  |   |        |
| attending kindergarten in t  | ne same rigorous k<br>ne district. The re   | indergarten progra<br>sults of the screene                | um and supports as all other studener will help staff to plan my child's action, assessment, daily schedule | S      |
| <ul> <li>My child's progress and per<br/>as a guide, with attention to</li> </ul>  |   | _   | e Kentucky Core Academic Standa<br>arten.   | ırds   |
| <ul> <li>I may rescind my request fo<br/>providing the school princi</li> </ul>  | •   | •   | ndraw my child from kindergarten lecision.  | by     |
| Parent/Guardian's Signature  |   |   | Date  |        |

| Director of Pupil Personnel's Signature            | Date                            |
|--|---------------------------------|
| Director of Instruction's Signature                | Date                            |
| PETITION FOR EARLY ENROLLMENT                      | ☐ Recommended ☐ Not Recommended |
| Comments:  |                                 |
| Child met the Kindergarten Readiness requirements? | □ Yes □ No                      |
| Date of Screener//                                 |                                 |
| Date Received in Central Office//                  |                                 |
| FOR DISTRICT USE ONLY                              |                                 |