

# MTSD 2025 - 2026

## PRE-K PROGRAM



### PA PRE-K COUNTS & MTSD FINANCIAL ASSISTANCE SCREENING APPLICATION

Please Note:

- This form is a screening tool and does not guarantee funding assignment or enrollment.

• The information is confidential to the PA Pre-K Counts Program and to the MTSD Scholarship Program.

Household / Family Size	Income Eligibility for Head Start	Income Eligibility for Pre-K Counts	Income Eligibility for EITC
2	\$21,150	\$63,450	\$112,348
3	\$26,650	\$79,950	\$132,123
4	\$32,150	\$96,450	\$151,898
5	\$37,650	\$112,950	\$171,673
6	\$43,150	\$129,450	\$191,448
7	\$48,650	\$145,950	\$211,223
8	\$54,150	\$162,450	\$230,998

## Directions

The MTSD Pre-K Program has financial assistance for qualifying families (e.g., Pre-K Counts, EITC Scholarships). (Note: The funding is not unlimited so qualifying for financial assistance does not guarantee you will be awarded financial assistance.) To qualify for financial assistance for the MTSD Pre-K Program, a family must first demonstrate a financial need. Using the chart above, determine your financial need relative to your family size. If you feel you may qualify for financial assistance, complete pages 5-8 entirely. Then scan/email completed pages 5-8 along **with the appropriate income verification** to [greenaway@mtsd.org](mailto:greenaway@mtsd.org) or USPS mail them to:

Millcreek Township School District  
 Pre-K Program Office  
 3740 West 26th Street  
 Erie, PA 16506

Guidelines regarding required income verification can be found on pages 3-4.

If your family meets the Income Eligibility for Head Start or your family qualifies for food stamps, you are eligible for Head Start early childhood education. Please refer to page 2 for additional information. Families eligible for Head Start are encouraged to enroll their children in the Head Start program. In addition to educational programming, Head Start provides comprehensive services to enrolled children and their families (e.g., health check-ups and services, meals, family support services, transportation, before/after care program services at select locations, community connections).



# FAMILIES ELIGIBLE FOR HEAD START

Families eligible for Head Start (100% of FPL or below OR family qualifies for food stamps) are encouraged to enroll their children in the Head Start program.

In addition to educational programming, Head Start provides comprehensive services to enrolled children and their families (e.g., health check-ups and services, meals, family support services, transportation, before/after care program services at select locations, community connections).

Important information for families eligible for Head Start:

## Contact information for Head Start providers

- Erie County ELRC contact: <https://nwirelrc.org/>; 814-836-5898
- Head Start ECLKC contact: <https://eclkc.ohs.acf.hhs.gov/>; 1-866-763-6481
- Child Development Centers, Inc.: <http://www.cdcenters.org>; 814-480-9505

### Asbury Child Development Center, Inc.

3814 Asbury Road; Erie PA 16506  
814-670-0838

### Elk Valley Head Start

2556 Maple Avenue; Lake City PA 16423  
814-670-0838

### Downtown Child Development Center, Inc.

121 East 10th Street; Erie PA 16501  
814-480-0645

### Century Child Development Center, Inc.

504 East 27th Street; Erie PA 16504  
814-670-0838

### Cascade Child Development Center, Inc.

950 West 7th Street; Erie PA 16502  
814-413-0133

### Roosevelt Child Development Center, Inc.

2300 Cranberry Street; Erie PA 16502  
814-413-0720

- Benedictine Sisters of Erie, Inc.; 345 East 9th Street, Erie, PA 16503; 814-454-4514

Application and/or assistance with referral available upon request. Call: 814-836-6904

Brochure or website with information about Head Start

- PA Head Start Brochure: [https://s35719.p133.sites.pressdns.com/wp-content/uploads/2019/08/Head-Start\\_-Early-Head-Start.pdf](https://s35719.p133.sites.pressdns.com/wp-content/uploads/2019/08/Head-Start_-Early-Head-Start.pdf)
- Head Start ECLKC: <https://eclkc.ohs.acf.hhs.gov/>
- PA Dept of Human Services: <https://www.dhs.pa.gov/Services/Children/Pages/Head-Start.aspx>
- PA Promise for Children: <https://papromiseforchildren.com/>
  - <https://papromiseforchildren.com/help-them-learn/head-start-and-early-head-start/>

# INCOME VERIFICATION GUIDELINES

## Whose Income is Counted

- The parent or caretaker of the child.
- The parent or caretaker's spouse, if living in the home.
- Children's, excluding a child's earned income.
- Others residing with the child, in instances when these persons are counted toward family size.

## Income Verification Guidance

- The following are included when verifying income:
  - Earned income from all sources including gross wages from work, cash, and in-kind payments received by an individual in exchange for services and net income from self-employment.
  - Unearned income including cash and contributions received by an individual for which the individual does not perform a service such as: alimony; child support; military family allotments (excluding service-connected disability benefits; see exclusions below) or other regular support from an absent family member; pensions; public assistance (including Temporary Assistance for Needy Families, Supplemental Security Insurance, Emergency Assistance money payments and non-Federally Funded General Assistance or General Relief money payments); and dividends, interest, net income, net royalties and periodic receipts from estates or trusts.
  - Unearned benefits received periodically by an individual, such as unemployment compensation, workman's compensation, gambling or lottery winnings, or retirement benefits.

## Verification of Income

- Acceptable verification of earned income from employment includes pay stubs reflecting earnings, W-2 forms, the IRS form used for reporting tips, a written employer statement of anticipated earnings or other document that establishes the parent's or caretaker's anticipated earnings from employment.
- Acceptable verification from self-employment includes tax returns, business records or other documents establishing profit from self-employment.
- Acceptable verification of unearned income includes a copy of a current benefit check, an award letter that designates the amount of a grant or benefit, such as a letter from the Social Security Administration stating the amount of the social security benefit, a bank statement, a court order, or other document or database report that establishes the amount of unearned income.
- A signed, written statement explaining how the family's basic needs are met may be accepted when a family indicates that they do not have any income or are being supported by someone living outside the household. If a family receives or pays child support, the eligibility agency shall verify the amount of support received or paid by the family by documents from the Pennsylvania Department of Human Services.

## Time Period

- The period of time for income verification is the 12 months immediately before the month in which the application or reapplication for enrollment of a child is made, or for the calendar year immediately before the calendar year in which the application or reapplication is made.

## Income Deductions

- The following are deducted when determining family income:
  - Voluntary or court-ordered child support or child support paid by the parent or caretaker or family member to a present or former spouse not residing in the same household.
  - A medical expense not reimbursed through medical insurance that exceeds 10 percent of the family gross monthly income.

## Income Exclusions

- The following are excluded when determining family income:
  - Employment earnings of an individual who is an emancipated minor.
  - Tax refunds, including earned income tax credits.
  - Withdrawals of bank, credit union or brokerage deposits or money borrowed.
  - Loans or grants, such as scholarships or income from federal student aid or participation in work-study program.
  - Payments to volunteers in service to America, such as Americorps or Foster Grandparent programs.
  - Any foster care payments by a foster care placement agency, including payments to permanent legal custodians or adoption assistance payments by county children and youth agency.
  - A veteran's service-connected disability benefit payments as stated in, Act 27 of 2024 amended Title 51 of the Pennsylvania Consolidated Statutes (Military).
    - A veterans' service-connected disability benefit payment or unspent veterans' service-connected disability payments may not be included as income for any Commonwealth program that evaluates income as a condition of eligibility.
    - Benefit payments provided to an unmarried surviving spouse upon the death of a veteran for any compensation or payment the unmarried surviving spouse is entitled to receive, may not be included as income.

# MTSD PA Pre-K: 2025-26

## Financial Assistance Application

Child's Last Name	Child's First Name	Middle Initial
Address		
City	State <i>Pennsylvania</i>	Zip Code
School District of Residence		County
Child's Date of Birth (mm/dd/yyyy)	Age ___2 ___3 ___4 ___5	Gender ___Female ___Male
Name of Parent/Guardian completing this form (Last, First)		Gender ___Female ___Male
Relationship to the Child ___ Father ___ Mother ___ Guardian ___ Other: _____	Select ___ Biological ___ Foster ___ Adoptive ___ Other: _____	
Role ___ Primary Guardian    ___ Legal Guardian ___ Secondary Guardian    ___ Other: _____		

Employment Status of Parent/Guardian: ___ Employed Full-time ___ Employed Part-time ___ Unemployed ___ Other: _____	Employment Status of 2nd Parent/Guardian <i>(if applicable):</i> ___ Employed Full-time ___ Employed Part-time ___ Unemployed ___ Other: _____
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Household Income Source(s) <i>(must check all that apply):</i>		
___ Employment	___ Self-Employment	___ Unemployment Compensation
___ Social Security	___ SSI	___ Worker's Compensation
___ Child Support	___ Alimony	___ TANF Cash Payments
___ Other: _____		

# Verification of Income

- Income verification must be attached to the submitted Financial Assistance Application.
- Verification documents must be less than 12 months old.
- All income of all members of the household must be reported and verified.
- Previous year's income tax statement is required for income verification.
- Refer to pages 7-8 for additional income verification guidelines.

**List Household Members Below for Determination of Family Size (required):**  
*(Include the enrolling child first)*

	Name	Relationship to Child	Age
1		<i>Enrolling Child</i>	
2			
3			
4			
5			
6			
7			
8			

Per PKC Statute, Regulations, and Guidelines, the following members of the household are included in family size:

- Parent of the child (biological or adoptive mother or father, stepmother or stepfather, caretaker, or spouse who exercises care for the child)
- A biological, adoptive, unrelated or foster care child or stepchild of the parent or caretaker who is under 18 years of age and not emancipated.
- A child who is 18 years of age or older but under 22 years of age who is enrolled in high school, a general educational development program, or a post-secondary program leading to a degree, diploma, or certificate and who is wholly or partially dependent on the income of the parent or caretaker or spouse of the parent or caretaker.
- Others supported by the income of the parent(s) or guardian(s) of the child enrolling or participating in the program. If counted toward family size, any applicable income of these persons must also be counted for eligibility purposes.

Note: A family size value of one (1) with an income of \$0 is entered when a foster child is applying for Pre-K Counts.

**Determined Family Size =** \_\_\_\_\_

## Other Eligibility Factors:

Check all that apply. If noted, an attachment must be included with this financial assistance application.

Each qualifying eligibility factor is assigned one point. Preference is given to applications based on the number of points assigned in this section.

—	<b>Behavioral Supports:</b> <i>(Note: Attach verification if this criterion is selected.)</i> The child is being referred to PA Pre-K Counts from an appropriately credential health or mental health practitioner who is not employed by the PA Pre-K Counts program. Or The child is receiving mental health treatment.
—	<b>Child Protective Services:</b> The child is a foster child, a kinship care child, or receiving Children & Youth services.
—	<b>Education Level of Parent:</b> At least one of the child's parent/guardians does not have a high school diploma or GED or post-secondary degree.
—	<b>English Language Learner:</b> The child's first language is not English / the child is in process of learning English.
—	<b>Family / Living Structure:</b> The child lives with a single parent, has parents who are divorced, or lives with relatives as guardians.
—	<b>Incarcerated Parent:</b> One or both child's parents is currently in prison or was in prison within the past 12 months.
—	<b>Individualized Education Plan (IEP):</b> <i>(Note: Attach verification if this criterion is selected.)</i> The child is currently enrolled in the Pre-K Early Intervention program with an active IEP.
—	<b>Infant/Toddler Contracted Slots Program (ITCSP):</b> The child is enrolled in ITCSP and is eligible to transition to PA PKC.
—	<b>Homeless:</b> The child lacks fixed, regular, and adequate nighttime residence due to one of the following: <ul style="list-style-type: none"> <li>• The family is staying with others because of a loss of housing, economic hardship, or other similar reason.</li> <li>• The family is living in a shelter (e.g., youth, emergency, transitional, domestic violence) or is living in a motel, hotel, or campground.</li> <li>• The family is staying in a public or private place not ordinarily used as a regular sleeping accommodation for human beings. The family is living in cars, parks, public spaces, abandoned buildings, transportation stations, or similar settings.</li> <li>• The family lives in substandard housing (e.g., limited or no utilities, unsafe conditions).</li> <li>• The child has been abandoned, in a hospital, or awaiting foster care placement.</li> </ul>
—	<b>Migrant (non-immigrant) Seasonal Family:</b> The child has moved from one school district to another within the past 3 years in order to accompany or to join a migrant parent/guardian who is a migratory worker (working as a fisher or in agri-related business such as fishing, meat, or vegetable processing or working in nurseries such as Christmas and evergreen trees farming).
—	<b>TANF, SSI, SNAP:</b> <i>(Note: Attach verification if this criterion is selected.)</i> The family participates in the TANF, SSI, or SNAP programs.
—	<b>Teen Parent:</b> The child's mother or father was under the age of 18 when the child was born.
—	<b>Other:</b> _____

# MTSD PA Pre-K: 2025-26

## Financial Assistance Application

### Form Completion & Accuracy Acknowledgement

Family Assurances:

By signing below, I acknowledge and agree to the following:

- I understand that my child's eligibility for PA Pre-K Counts (PA PKC) is subject to the program's two-year participation limit. My child must be at least three years old by the kindergarten cutoff date set by the school district where we live to assure compliance with receiving only two-years of PA PKC programming.
- Once my child reaches the age required to enroll in kindergarten in the public school district where we live, I understand they will no longer be eligible for PA PKC funding.
- I understand that my child's enrollment is contingent upon meeting the eligibility criteria, including income verification and prioritization based on risk factors.
- I understand that the PA PKC program is an educational program with attendance requirements. I agree to ensure my child's regular attendance and to notify the program in case of absences. The MTSD Pre-K Program hours are:
  - Drop off: 9 to 9:15 am
  - Pre-K Program 9:15 am to 3 pm
  - Pick up: 3 to 3:15 pm
- I understand that the PA PKC portion of the day will be secular (non-religious) in nature and will not include religious instruction during the Pre-K Program day (9:15 am to 3 pm).

To the best of my knowledge, the information provided in this financial assistance application and the associated income documentation is accurate. I understand that I may be asked to verify or substantiate information provided.

I understand that incomplete and/or inaccurate information may result in cancellation of any financial assistance I may be awarded.

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(mm/dd/yyyy)

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Parent/Guardian Signature

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Child or Children you are applying to enroll in the MTSD Pre-K Program

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Parent/Guardian Printed Name

*Reminder – Income verification must be attached to this scholarship application in order to be considered a complete scholarship application and be considered.*