



Three- and Four-Year-Old State Pre-K Program is supported through Kansas state grants. This program is free for those who are selected. All students must meet one or more of the criteria listed below. Please mark all of the criteria that qualifies your child for a Three- or Four-Year-Old State Pre-K Program. Some additional information may be required of you in order to verify this criterion. Students must live beyond 2.5 miles of the School to be eligible for busing. Please note a Curriculum Fee will be due in September.

_____ **Qualify for free lunches on the Federal Lunch Program**
(Application is required. Applications will be available after July 1)
Yearly income _____ Number of people living in your home _____

_____ **Single Parent Household** (not married, not two parent household)
List Parent Name: _____

_____ **Teenage Parent at the Time of Child's Birth**
Mother's Birth Date _____ Age of mother at child's birth _____
Father's Birth Date _____ Age of father at child's birth _____

_____ **Parent(s) do not hold a high school diploma or GED**
Highest Grade Completed Mother _____ Father _____

_____ **Limited English Proficiency (another language is primarily spoken in the home)**
(Proficiency will be determined at screening.) List languages spoken _____

_____ **Child has lower than expected Developmental progress**
(Based on results of an appropriate and valid assessment).

_____ Does your child have a current **I.E.P (Individualized Education Plan)** Yes _____ No _____

Do you have a time preference (*Not Guaranteed-Circle One*)? AM PM Either

Child's Name: _____ Child's Gender: M F

Date of Birth: _____ **Age by August 31, 2025** _____

Parent (s) Name: _____

Phone: _____

Address: _____

Email address: _____

Parent/Guardian Signature _____ Date _____

For Office Use Only

Date Received _____ Time Received _____

Date Given to Principal _____ Date Processed in Skyward _____