

2026-2027 Boone Central 4-Year-Old ABC Preschool Application

One application per child. Only a parent/legal guardian may hand in the completed application.

Application Window: February 12th-March 10th

***All Applications Must Be Turned Into The Office In Person And Will be Time Stamped Upon Arrival (starting at 7:30am)**

***Applications Will NOT Be Accepted Without A Copy Of An Immunization Record And A Copy Of A Valid Birth Certificate**

***Child Must Turn 4 By July 31st, 2026**

Student Information:

Last Name:

First Name:

Date of Birth:

Gender: Male Female

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: White Asian Black or African American American Indian or Alaska Native Other: _____

Applications will be rated on the following criteria:

| | | | |
|---|-----|----|----|
| -Does your child have an Individualized Education Program (IEP)? | Yes | No | |
| -Was your child born prematurely and can be verified by a physician? | Yes | No | |
| -Does your child qualify for free and reduced lunch? | Yes | No | NA |
| -Does your child have a teenage parent who has not currently obtained a HS diploma? | Yes | No | |
| -Does your child live in a home whose occupants have limited ability to speak & understand English? | Yes | No | |
| -Does your child live within the Boone Central School district? | Yes | No | |
| -Does your child live out of district but has a sibling attending BCS? | Yes | No | |
| -Does your child plan to attend Boone Central Elementary for Kindergarten? | Yes | No | |
| -Does your child live out of district and plans to attend Kindergarten elsewhere? | Yes | No | |

Parent Information:

Parent: First Name: _____ Last Name: _____

Mailing Address: _____
Street Address City State Zip Code

Phone: _____ Email Address: _____

Parent: First Name: _____ Last Name: _____

Mailing Address: _____
Street Address City State Zip Code

Phone: _____ Email Address: _____

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Daycare/Previous Preschool:

What daycare does your child attend? _____

If your child attended preschool prior, where did they attend? _____

Parent/Guardian Signature:

I certify that all the above information is true and correct. Any deliberate misrepresentation of the information will result in the child being withdrawn from the program.

Signature: _____ Date: _____

****Parents Will Be Notified By Letter In May Whether Or Not They Have Been Accepted***

****Students will only be allowed to attend one year of preschool at Boone Central Elementary***

****Questions- contact Claire Kayton at 402-395-2134***