

# 2026-27 North Carolina Pre-Kindergarten Application

NC Pre-Kindergarten is a free, high-quality North Carolina funded program. Your child's regular, on-time attendance will strengthen classroom, pre-literacy, math, and social skills in a child-focused learning environment.

Eligibility details AND frequently asked questions for parents: [www.theAllianceforChildren.org](http://www.theAllianceforChildren.org) under NC Pre-K.

**Turn in copies of all paperwork listed below with this completed application form:**

\_\_\_\_\_ **A Copy of Child's Birth Certificate or copy of child's passport**

\_\_\_\_\_ **Two copies of Proofs of Residency with a parent name and current Union County address**

(Examples: current utility bill, car or home insurance card, driver's license or registration, lease or mortgage statement

\_\_\_\_\_ **Proof of household income** Choose from these options for working parent/stepparents/guardians/custodians:

A month's worth of consecutive recent check stubs **OR** If same job for all of 2025, provide a 2025 W-2 **or** 2025 tax return. If **new** job, job offer letter from employer. **OR** copy of child's recent Medicaid card **OR** copy of family's current Food and Nutrition services letter **OR** Public Housing assistance letter. Include documents for: alimony, SSA, SSDI, child support, disability, unemployment for mom and dad/stepmom/stepdad.

\_\_\_\_\_ Review sites and locations, complete and return the **Site Options form** with the application packet

\_\_\_\_\_ If applicable - Legal guardian, custodian, or foster provide legal/DSS documents with the application

**Child's Information**

*Please complete each line and print clearly*

**Child's First Name:**

**Middle**

**Last**

**Address:**

Street

City

State

Zip Code

**Age:** \_\_\_\_\_

*Child must be four (4) on 8/31/26*

**Child's Birthday**

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Male

Female

**Language child speaks most:**

**Race:** (check **ALL** that apply):

Black/African American

White or Latino/Hispanic

Asian

American Indian/Alaska Native

Native Hawaiian/Other Pacific Islander

Other Race (specify): \_\_\_\_\_

**(Check One)**  Hispanic/Latino  Non-Hispanic/Latino

**Does this child have a parent who is actively serving in the military or injured during military service?**  No  Yes

(include military LES or disability benefit letter with application and **all other required documents, including income documents**)

**Child Lives With:** Check all that apply:

Both Parents

Mother/Stepmother

Father/Stepfather

Other \_\_\_\_\_

Foster Parent \*  Legal Guardian or Legal Custodian\* (*\*attach copies of legal documents*)

Did the child attend childcare at 3 years of age?  No  Yes

I receive or applied for childcare voucher at DSS  No (to apply call 704-706-9494)  Yes

**Who cares for this child daily?** List childcare site or caregiver here: \_\_\_\_\_

Does your child have a chronic health condition diagnosed by a doctor?  No  Yes\* condition \_\_\_\_\_

Will your child require medication during the school day or for possible allergic reactions?  No  Yes\* **Provide the site with a doctor completed School Medication Plan**

Does your child receive support services **now** for speech, a special need or disability?  No  Yes \_\_\_speech \_\_\_OT \_\_\_PT Other \_\_\_\_\_

List UCPS or private provider \_\_\_\_\_ #days per week \_\_\_\_\_ *Continue all services, NC Pre-K does not provide services.*

Do you have concerns about your child's development (learning, speech, hearing, or behavior)?  No  Yes Concern? \* \_\_\_\_\_

\*\*\*Call the UCPS EC Preschool Assessment Center at 704-282-6259 to inquire about assessments and support services for children ages 3 or 4.

*Complete this section for family members who reside with the child.*

*Print clearly please*

Child's Mother  Female Legal Guardian or Custodian

Stepmother (legally married to child's father)  Foster parent

Full Address: (Street, City, State, Zip Code)

Same as child

Own \_\_\_\_\_

Rent \_\_\_\_\_

Live with family member \_\_\_\_\_

Other \_\_\_\_\_

**BEST** Phone Number

Email:

Work #

**Check ALL that apply:**

Employed

Unemployed  Looking for work  Attending College  In High

Receive unemployment income

School/GED program  In Job Training  FNS/SNAP  Medicaid

<input type="checkbox"/> Father <input type="checkbox"/> Stepfather	Full Name of Male Parent or Legal Caregiver _____	Full Address: (Street, City, State, Zip Code) <input type="checkbox"/> Same address as child
<input type="checkbox"/> Male Legal Guardian/custodian (Legally married to child's mom)		

Best Phone #: _____	Father's Email: _____	Work # _____
<input type="checkbox"/> Employed    How many hours per week? _____  Employer _____	Father/Stepfather/ Male Caregiver: Check <b>all</b> that apply: <input type="checkbox"/> Unemployed <input type="checkbox"/> Looking for work <input type="checkbox"/> Attending College <input type="checkbox"/> In Job Training <input type="checkbox"/> In High School/GED program	<input type="checkbox"/> Receive unemployment    provide benefit letter with child's application packet  <input type="checkbox"/> Medicaid

**List parents, step-parents, legal guardians, brothers\*, sisters\*, half-brothers\* and sisters\*, step brothers\* and sisters\* living in child's home.**

Clearly Print - First and Last Name	Relationship to the Pre-K Child	Birthdate & age	List Brother or sister's school OR childcare site
1. Child: _____			
2. _____			
3. _____			
4. _____			
5. _____			
6. _____			
7. _____			

If more, attach list with application

Total Number of family members listed above (include Pre-K student) \_\_\_\_\_

**Emergency Contact Information      List a family member for contact if parents cannot be reached in an emergency**

Emergency Contact: _____	Relationship to Child: _____
Home Phone: _____	Work Phone: _____
	Mobile Phone: _____

**Home Language Survey      Your child will be assessed in the language you list below\*.      Please answer with this in mind**

Language the child learned to speak?	Second language?	Most often? *
Mother's Primary language: _____	Second language? _____	Primary/ Father? _____
		Second language? _____

I give my permission for NC Pre-K staff, UCPS EC or Title 1, NC Pre-K teachers and/or classroom support staff to share documents, discuss my child's progress and needs for classroom or outside support to best serve my child.

- I understand that this application is for possible enrollment following NC Pre-K eligibility guidelines.
- I give permission for my child to be photographed and/or videotaped for display, scrapbook, newspaper articles, and/or posting to social media, Facebook or websites.
- I agree that my child will attend NC Pre-K on time and on a regular basis.
- I will work as a team with my child's teachers and staff.

*My signature below certifies that **all information** on this application and the documents I provided is accurate, true, and completed correctly.*

Mother/Caregiver Signature: X \_\_\_\_\_ Date \_\_\_\_\_ **I receive no income of any kind** \_\_\_\_\_ Initial here

Father/Caregiver Signature: X \_\_\_\_\_ Date \_\_\_\_\_ **I receive no income of any kind** \_\_\_\_\_ Initial here

Complete application packets may be mailed or returned to:



2661 W. Roosevelt Blvd., Suite A ~ Monroe NC 28110

**Anytime: Drop slot at office front door**

**Questions: [NCPre-K@theAllianceforChildren.org](mailto:NCPre-K@theAllianceforChildren.org)**

Phone: 704-226-1407, ext. 23 or 30

**Online applications and "Frequently Asked Questions" under NC Pre-K at: [www.theAllianceforChildren.org](http://www.theAllianceforChildren.org)**

**Required in August!**

North Carolina law requires parents to provide the child's up to date shot records and a physical/dental exam form completed by a physician to the site in August.

**Health and dental screening forms at**

**[www.theAllianceforChildren.org](http://www.theAllianceforChildren.org) under NC Pre-K.**

Note: these documents do not have to be included for the initial eligibility/initial application process.

You will register your child for Kindergarten in Feb. 2027. Save a copy of these health documents for registration.

**Child's Name:** First \_\_\_\_\_ Last \_\_\_\_\_

Questions about NC Pre-K eligibility? Visit the NC Pre-K page at [www.theAllianceforChildren.org](http://www.theAllianceforChildren.org) or email [NCPre-K@theAllianceforChildren.org](mailto:NCPre-K@theAllianceforChildren.org) for more information.

- NC Pre-K sites **(E)** offer limited extended care spots before and/or after NC Pre-K hours.
- If needed, parents arrange any extended care with the site director before school begins.
- Parents pay sites for time outside NC Pre-K hours. NC Pre-K hours are free for eligible families. Call 704-706-9494 to apply for income-based childcare assistance for wraparound care and/or care during breaks.
- Parents provide transportation to and from school each day, map out sites before listing.
- **On-time, regular attendance helps your child receive the full benefit of the NC Pre-K program.**

NC Pre-K Partner Sites	Site Address	NC Pre-K Class Hours
A Plus Childcare & Learning Ctr. <b>(E)</b>	109 Camelia Dr, Monroe	7:30-2:00
Childcare Network 121 <b>(E)</b>	780 Sutton Place, Monroe	7:30-2:00
Childtime 2014/Indian Trail <b>(E)</b>	120 Business Park Dr., Indian Trail	7:30-2:00
East Elementary School	221 Elizabeth Ave., Monroe	7:00-2:00
Indian Trail Elementary* <i>note below</i>	200 Education Rd., Indian Trail	7:15-2:00
Kids R Kids	5549 Potter Rd., Matthews	7:30-2:00
LeafSpring School at Matthews <b>(E)</b>	3424 Pleasant Plains Rd., Stallings	8:00-2:30
Oakboro Kid's Club (Stanly Co.) <b>(E)</b>	206 N. Main St, Oakboro	8:00-2:30
S.T.E.P.'s Developmental Academy	108 Indian Trail Rd., Indian Trail	7:15-2:20
Waxhaw Elementary* <i>note below</i>	1101 Old Providence Rd, Waxhaw	7:00-1:50
Weekday Children's Ministries	801 S. Hayne St, Monroe	7:30-2:00
Wingate Baptist <b>(E)</b>	109 E. Elm St, Wingate	7:30-2:00

*NC Pre-K follows the UCPS traditional calendar including workdays, breaks and holidays. Classes begin at the end of August and end in early June.*

**Class hours and site listings could be changed or adjusted.**

*\*For Indian Trail and Waxhaw Elementary sites. placement preference to children who will attend the site for Kindergarten within UCPS school attendance lines. Parents provide car transportation.*

All NC Pre-K classrooms meet the same quality standards for teacher education, classroom quality, and use the Creative Curriculum®.

**I can drop off and pick up my child from one of these three sites for the 26-27 school year:**

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**Note:** You may be offered a different site due to limited class size, options are not guaranteed.

Take time to map out and look at reviews before listing a site. Take a picture of this form for your records.

