



Pre-K Counts in Bucks County

Overview and Family Application for the school year beginning August 2016

PENDING COMMONWEALTH APPROVAL OF FUNDING

Bucks County has seven Pre-K Counts grants from the Commonwealth of Pennsylvania. Those grants allow families with children (ages three and four years on or before September 1) to apply for entry in a high quality, half-day or full-day pre-school program ***at no cost to the family.***

The belief is that early education will make children more ready to learn when they enter kindergarten.

We are accepting applications for pre-school programs for the 2016-2017 school year.

Residents of Pennsylvania who meet the required criteria will be considered for this five day-a-week program. Some of the programs are half-day and others are full-day based on the grant received. All families must meet the income guidelines to be eligible for the program. A family of four can earn up to \$72,900 a year and still qualify.

Families who qualify financially and *also* have secondary at-risk factors (for example: English as a Second Language, Foster Care, Early Intervention Services, etc.) will be given priority consideration for the program.

To apply for Pre-K Counts in Bucks County, complete the application on pages 4, 5 & 6 of this packet. If you are completing the application electronically, please print and then sign the application (on page 5 & 6) before submitting it. Families may submit the Pre-K Counts application and all supporting documents to their school district representative listed on the next page. If your school district is not listed, please send your materials to the United Way of Bucks County.

Thank you for your interest in the Pennsylvania Pre-K Counts program!



Bucks County Pre-K Counts Contact Information

Bristol Township School District

Mrs. Michele Anderson
6401 Mill Creek Road
Levittown, PA 19057
267 599 2017
michele.anderson@bristoltwpsd.org

Morrisville School District

Ms. Patricia Miiller
Morrisville Intermediate School
550 West Palmer Street
Morrisville, PA 19067
215 736 5270
pmiiller@earthlink.net

Neshaminy School District

Dr. Christine McKee
Pupil Personnel Services
2001 Old Lincoln Highway
Langhorne, PA 19047
215 809 6558
cmckee@neshaminy.k12.pa.us

Pennsbury School District

Ms. Laurie Gafgen, Principal
Walt Disney Elementary School
200 Lakeside Drive North
Levittown, PA 19054
215 949 6868 ext. 20815
lgafgen@pennsburyisd.org

Quakertown School District

c/o LifeSpan School & Day Care
Ms. Natasha Banguero
2460 John Fries Hwy
Quakertown PA 18951
215-536-4417
nbanguero@lq.org

All other school districts in Bucks County:

Mrs. Candi Guerrero
United Way of Bucks County
413 Hood Boulevard
Fairless Hills, PA 19030
215 949 1660 x108
candig@uwbucks.org



Bucks County Pre-K Counts Application Checklist

Included in this packet are all of the necessary registration forms for our Pre-K Counts Program. Please complete the information and return it to the address listed on the contact sheet.

Applications will not be reviewed until the application and all supporting documents have been received. Thank you for your cooperation in this matter.

Please submit copies of the items listed below with your application:

_____ 2015 Federal Income Tax Return for all adults (18 & over) residing in your household

_____ Birth Certificate (child)

_____ Social Security Card or Number on Tax Return (child)

_____ Photo ID (Parent/Guardian)

_____ Confidential Pre-K Counts Application (all 3 pages must be completed)

_____ Proof of Residency: Lease/Deed or Mortgage Coupon. They must be current and have the child's name on lease.

_____ Three (3) additional proofs of residency such as vehicle/home owner's insurance, vehicle registration, utility bill, bank statement, etc.

The following items are due immediately upon acceptance into the program. You are encouraged to submit these forms with your registration, however it is not required.*

_____ Immunization Records

_____ Physical (completed after September 1, 2015), including vision, hearing, and dental screenings.

Please Note: Students may not begin the program until all health records are submitted and reviewed

Please print clearly.

SECTION 1: Child Information	
Child's Name _____	Today's date _____
Ethnicity (Check One): ___ Non-Hispanic ___ Hispanic ___ Other	
Race (Check One): ___ African American ___ American Indian ___ Asian ___ Caucasian ___ Native Hawaiian ___ Other	
Child's Date of Birth _____	___ Male ___ Female
Child's Social Security Number _____	Please submit a copy of the child's birth certificate.
<i>If you also have English as a Second Language, please complete this section.</i>	
Language(s) spoken at home _____	Language(s) child speaks _____
Special Needs/Concerns Related to Child: _____ <i>If the child is receiving early intervention services, please submit a copy of the child's IEP.</i>	
My local Elementary School: _____ in _____ School District.	

SECTION 2: Parent Information	
Parent/Guardian #1: Name _____	Date of Birth _____
Employment Status (Check One): ___ Full time ___ Part time ___ Unemployed	
Address _____	Apt. _____
City _____	State: PA Zip Code _____
Primary Phone Number _____	Alternate Phone Number _____
Email Address _____	
Parent/Guardian #2: Name _____	Date of Birth _____
Employment Status (Check One): ___ Full time ___ Part time ___ Unemployed	
Address _____	Apt. _____

City _____	State: PA	Zip Code _____
Primary Phone Number _____	Alternate Phone Number _____	
Email Address _____		
Highest education level completed- Parent #1: _____ Parent #2: _____		

SECTION 3: Household Income

A copy of the first two pages of your 2015 federal income tax return for all adults in the household MUST be submitted with this application.

Amount of income from all sources for all household members = _____

Number of Adults (everyone over age 18) in the household: _____	Ages _____
Number of Children in the household: _____	Ages _____

Check one: I rent/own my home I am living with another family

SECTION 4: Program Assurances & Signature

- Families are considered after the completed application and all supporting documents have been received.
- Families are accepted on a "need" basis and not from the date the application was submitted.
- Families whose children are selected for the Pre-K Counts program *must provide transportation on a daily basis to and from the pre-school to which they are assigned.*
- Families are required to attend parent/guardian conferences and at least one parent workshop.
- Attendance is essential. Except for illness, children must be prompt and present on a daily basis.
- The parent must complete the information on the next page of this application.

Please check below:

_____ To the best of my knowledge the information on this application is accurate.

_____ I accept the responsibilities of a Pre-K Counts family.

Parent/Guardian Signature _____	Date _____
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Parent/Guardian Name (Printed) _____

FOR PROGRAM USE ONLY Verification of Income _____	Date _____
<i>Staff Signature</i>	

SECTION 5: Release of Information

Child's Name _____

When necessary to the fulfillment of the Pre-K Counts grant or to enhance services provided to my child or family, I authorize release and sharing of information to:

Bucks County Intermediate Unit Yes No

My local school district (_____) Yes No

Pennsylvania Department of Education Yes No

When necessary for the fulfillment or enhancement of the Pre-K Counts grant, I authorize the use of photographs in which my child appears for purposes including, but not limited to, newsletters, press releases, and/or brochures.

I authorize the use of my child's photo as described above. Yes No

Parent/Guardian Signature _____

Date _____

SECTION 6: Additional Child Information (Required)

Are you currently enrolled in a Head Start Supplemental Assistance Program? Yes No

Is your child enrolled in the Federal Head Start Program? Yes No

Is your child enrolled in Child Care Works (subsidized child care)? Yes No

Is your family part of the Child Welfare System? Yes No

Does your child have behavioral supports or receive mental health treatment? Yes No

Is your child in foster care, kinship care, or receiving Child Protective service? Yes No

Is one of the child's parents incarcerated? Yes No

Is your child homeless (living in a motel, shelter, in substandard housing)? Yes No

Is the parent a migrant/seasonal worker in agricultural/fishing businesses? Yes No

Was the child's mother less than 18 years of age when he/she was born? Yes No

Does the parent have a high school diploma, GED? Yes No

Does the parent have post-secondary training? Yes No

All documents listed on page 3 must be included with your application.

We will not review or accept any application without all supporting documents.

Please submit this application and all documents requested to the Lead Agency listed on Page 2.

Thank you!