



2024-25 PA Pre-K Counts Enrollment Application

Placements will be prioritized based on eligibility/selection criteria and not on a first-come/first-serve basis. Once the program is full, applicants will be placed on a wait-list for ongoing enrollment and notified if openings occur throughout the school year.

Please select which center you would like to attend:

- Collegetown
- Hatboro
- Lansdale
- Royersford
- Norristown

Administrative Offices 200
Camp Hill Road
Fort Washington, PA 19034
www.playandlearn.com
215-643-4142

Last Name (Child)	First Name (Child)	Middle Initial
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Child's Date of Birth **Gender** **School District of Residence**
 Male Female

Child must be 3 by September 1, 2024. Please submit birth certificate and/or immunization record as proof of birthdate.

Parent /Guardian Information

Parent/Guardian 1 Name Address Home Phone Cell Phone Email	Parent/Guardian 2 Name Address Home Phone Cell Phone Email
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- Child resides at this address Child resides at this address

PreK Counts is a free 5-hour instructional day. If your child is eligible and approved for placement, and you want to request Before and After Care/Extra Days for your child, please list the times below.

PLEASE NOTE: Before and After Care/Extra Days is not guaranteed as it depends on center availability.

	From	To	
Monday			If approved for Before and After Care/Extra Days, which payment method would you use? ELRC Subsidized Funding Tuition Express Automatic Withdrawal Tuition Express (point of sale) online Special Arrangements:
Tuesday			
Wednesday			
Thursday			
Friday			

Parent Signature: _____ Date: _____

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Group Assignment: _____ Before & After Care/ Extra Days Schedule Request: _____

Entrance Date: _____ Approved Not approved Modified: _____

Name of Parent or Guardian completing this application	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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Relationship to Child <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____ <p style="text-align: center;">(please specify)</p>	(Select) <input type="checkbox"/> Biological <input type="checkbox"/> Foster <input type="checkbox"/> Adoptive <input type="checkbox"/> Other _____ <p style="text-align: center;">(please specify)</p>
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Role
<input type="checkbox"/> Primary Guardian <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Secondary Guardian <input type="checkbox"/> Other _____ <p style="text-align: right;">(please specify)</p>

Child's Race (optional)
<input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Not Applicable
Child's Ethnicity (optional)
<input type="checkbox"/> Hispanic <input type="checkbox"/> English <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Spanish <input type="checkbox"/> Not Applicable <input type="checkbox"/> Other _____ <p style="text-align: right;">(please specify)</p>

List Household Members below for determination of family size *(required)*:

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

Per PKC Statute, Regulations, and Guidance, 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)
- A biological, adoptive, unrelated or foster 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 Pennsylvania Pre-K Counts.

DETERMINED FAMILY SIZE =	<p style="text-align: center;">FOR OFFICE USE ONLY:</p> <p style="text-align: center;">STAFF VERIFICATION SIGNATURE</p>
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Employment Status of parent/guardian <input type="checkbox"/> Employed Full-Time <input type="checkbox"/> Employed Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Other _____	Employment Status of 2 nd parent/guardian (if applicable) <input type="checkbox"/> Employed Full-Time <input type="checkbox"/> Employed Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Other _____
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Income eligibility for PreK Counts is determined by reviewing all sources of documentation and verifying that the family income is at or below 300% of the federal poverty level relative to the size of the family.

Household Income Sources (Must check all that apply and provide supporting documentation such as W-2, tax return from previous year, one month of recent pay stubs, or other documentation to verify your selections below.):

- | | |
|---------------------------|-----------------------|
| Employment | Child Support |
| Social Security | Worker's Compensation |
| Self-Employment | Alimony |
| SSI | TANF Cash Payments |
| Unemployment Compensation | Other |

NOTE: If it is determined that our family income, based on our family size, is at or below 100% of the federal poverty level, information regarding our potential eligibility for Head Start services and how/where to apply will be shared with us from the PreK Counts program. While we will be encouraged to apply for Head Start, we may still choose PreK Counts if it best meets our family's needs.

Income Verification		2024 Federal Poverty Level Guidelines Based On Annual Income	
Family Size	100% (Head Start Eligible)	300% (Pre-K Counts Eligible)	
1	\$15,060	\$45,180	
2	\$20,440	\$61,320	
3	\$25,820	\$77,460	
4	\$31,200	\$93,600	
5	\$36,580	\$109,740	
6	\$41,960	\$125,880	
7	\$47,340	\$142,020	
8	\$52,720	\$158,160	
Each Additional	+\$5,380	+\$16,140 for each additional family member	

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Level of Income Verified

STAFF VERIFICATION SIGNATURE

DATE

Other Child Eligibility Risk Factor Criterion

(Must check all that apply and provide supporting documentation upon request):

<input type="checkbox"/>	Behavioral Supports: A child who was referred to PA Pre-K Counts from an appropriately credentialed health or mental health practitioner who is not employed by the PA Pre-K Counts program; a child who is receiving mental health treatment. Additional verification beyond the interview is required.
<input type="checkbox"/>	Child Protective Services: A child who is a foster child, a kinship care child or receiving Children and Youth services.
<input type="checkbox"/>	Education Level of Guardian: Does not have high school diploma or GED or post-secondary degree.
<input type="checkbox"/>	English Language Learner: A child whose first language is not English and who is in the process of learning English is considered an English Language Learner.
<input type="checkbox"/>	Individualized Education Plan (IEP): A child who is currently enrolled in the Preschool Early Intervention program with an active IEP. Verification would be a copy of the IEP or other source of documentation from the parent or Early Intervention provider.
<input type="checkbox"/>	Incarcerated Parent: A child for whom one of the child's parents is currently in prison.
<input type="checkbox"/>	Homeless: A child who lacks a fixed, regular, and adequate nighttime residence due to one of the following: A.Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, or camping grounds due to lack of alternate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; B.Children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; C.Children who are living in cars, parks, public places, abandoned buildings, substandard housing, bus or train stations, or similar settings.
<input type="checkbox"/>	Migrant (Non-Immigrant)/Seasonal Student: A migrant child has moved from one school district to another in order to accompany or to join a migrant parent or guardian, who is a migratory worker or migratory fisher, within the preceding 36 months, in order to obtain temporary or seasonal employment in qualifying agricultural or fishing work including agri-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
<input type="checkbox"/>	Teen Mother: A child whose mother was under the age of 18 when the child was born.

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

Parent/Guardian (Signature)

Date

Parent/Guardian Name (Print Name)