



ENGAGE. CHALLENGE. INSPIRE.

Thank you for your interest in the Orange County Schools Pre-K Program! Please keep this page for your records.

Deliver application package to:

OCS Pre-K Program Specialist at the OCS Pre-K Building behind Hillsborough Elementary School:
500 N. Nash Street, Hillsborough, NC 27278

Place complete application packets in the **blue drop box** located by the front door of the Pre-K building.

Application Checklist: When you submit your child’s application, please include copies of the following:

- Completed 2022-2023 OCS Pre-K Application
- Copy of Child’s Birth Certificate
- Proof of Residency: current utility bill or rental agreement
- Parent/Guardian photo ID: driver's license, passport, work badge
- Income Verification: 1040, 2021 W2, unemployment benefits, workers compensation, or 4 current and consecutive pay stubs

If applicable, application packets should also include:

- Documentation of a child’s chronic health condition
- Documentation of a parent’s military service

Application packets will only be processed when all of the above copies are received.

You will be contacted:

- If your application packet is incomplete
- To schedule a DIAL-4 screening appointment

Orange County Schools Pre-Kindergarten Program is funded by: Orange County Schools, Exceptional Children, North Carolina Pre-K, and Title I Pre-K.

The following schools currently serve Pre-K students and their families. Please note these sites are subject to change.

Location	Address	Arrival	Dismissal
Central Elementary	154 Hayes St. Hillsborough, NC	7:30am	2:50pm
Efland Cheeks Global Elementary	4401 Fuller Rd. Efland, NC	7:30am	2:50pm
New Hope Elementary	1900 New Hope Church Rd. Chapel Hill, NC	7:30am	2:50pm
Pathways Elementary	431 Strouds Creek Rd. Hillsborough, NC	7:30am	2:30pm

Questions? Please contact OCS Pre-K Program Specialist, Michelle Meade
michelle.meade@orange.k12.nc.us or 919.245.4006 ext. 18003





ORANGE COUNTY SCHOOLS PRE-KINDERGARTEN APPLICATION
2022-2023

CHILD'S INFORMATION:

Child's name _____ Date of Birth _____
First Middle Last

Child's Address _____
Street City State Zip County

Mailing Address _____
If different from above Street City State Zip

- American Indian/Alaska Native Asian Black/African American
 Native Hawaiian/ Other Pacific Islander White or European American Hispanic/Latino

Gender Male Female

Child's Primary Language _____

FAMILY INFORMATION

Who does the child live with?

- Mother and Father Single Mother Single Father Parent & Stepparent Joint Custody
 Grandparent(s) Foster parent(s) Legal Guardian Other: _____

If the child lives with a non-relative who has legal custody or guardianship, have you provided documentation?

Yes No N/A

Parent/Guardian 1: _____ Resides w/child: YES NO

Home Phone Number: _____ Cell Phone: _____

Email address: _____

- Parent/Guardian 1: **Employed** YES NO **Seeking Employment** YES NO
In job training YES NO **In High School/GED program** YES NO
Other employment YES NO **In post-secondary school** YES NO

If other employment, please describe: _____

Parent/Guardian 2: _____ Resides w/child: YES NO

Home Phone Number: _____ Cell Phone: _____

Email address: _____

- Parent/Guardian 2: **Employed** YES NO **Seeking Employment** YES NO
In job training YES NO **In High School/GED program** YES NO
Other employment YES NO **In post-secondary school** YES NO

If other employment, please describe: _____

What is the total number of family members in your household family size? _____

How many adults live in the home? _____ How many adults contribute to the household income? _____

How many minor children live in the home, including the Pre-K child? _____

Please list the names of <u>ALL</u> family members that live in the household.	Relationship to the NC Pre-K Child (e.g. mother, father, grandparent, sister, brother, step-parent, step-brother, step-sister, foster parent, etc.)	Date of Birth	If applicable, where do siblings attend school?
1.			
2.			
3.			
4.			
5.			
6.			
7.			

Parent/Guardian 1 Income - LIST ALL SOURCES OF INCOME (Please provide documentation)

Wages before taxes \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
SSI/TANF/Work First \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Unemployment Benefits \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Child Support/Alimony \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Other: _____ \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>

Parent/Guardian 2 Income -LIST ALL SOURCES OF INCOME (Please provide documentation)

Wages before taxes \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
SSI/TANF/Work First \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Unemployment Benefits \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Child Support/Alimony \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>
Other: _____ \$ _____	daily <input type="checkbox"/> weekly <input type="checkbox"/> twice a month <input type="checkbox"/> monthly <input type="checkbox"/> annually <input type="checkbox"/>

Any additional sources of income contributing to the household must be declared. Please provide total household income:
\$ _____

ADDITIONAL INFORMATION

- Is parent/legal guardian of the child an active member of the military, or was a parent or legal guardian of the child injured or killed while on active duty? (Verification of military documentation required) YES NO
- Does your child have Limited English Proficiency? YES NO
- Has your child **ever** been enrolled in a preschool, child care center, or day care? YES NO
- Is your child currently enrolled in a preschool, child care center, or day care? YES NO
If currently enrolled, what is the name of the program? _____
- Is the child receiving subsidy for child care? YES NO
- Does the child have a chronic health condition? (Documentation from physician required) YES NO
If yes, please describe: _____

- Does the child have a developmental or educational need? YES NO
If yes, please describe: _____
- Has the child been referred for services related to his/her disability? YES NO
- Does the child have an Individualized Education Plan (IEP)? YES NO
- Is the child currently receiving services related to his/her disability? YES NO

If yes, please specify (**check all that apply**)

- Speech Therapy
 Physical Therapy
 Occupational Therapy
 Educational Services
 Autism
 Developmental Delay
 Other, please specify: _____

PARENT RESPONSIBILITY AND PARTICIPATION: Please initial next to each statement.

- _____ I understand this is an application for services offered and does not constitute enrollment into any program.
- _____ I certify that the information given on this application is true and accurate and all income has been reported.
- _____ I authorize partnering Pre-K agencies, NC Pre-K, Title I, Orange County Partnership for Young Children, Orange County Schools (OCS), and Orange County Head Start to exchange information regarding my child for the purpose of determining eligibility for state and federally funded Pre-K programs and for data collection and program evaluation by the NC Division of Child Development and Early Education (DCDEE) and the Office of Early Learning (OEL).
- _____ I understand that if my child is selected to participate in the OCS Pre-K program, parent involvement will be critical to the success of my child, and I/we commit to participate as required by the program.
- _____ I give permission for my child to receive developmental, hearing, vision, dental and/or speech and language screening and for the results to be shared with partnering Pre-K programs (NC Pre-K, Title I, Orange County Partnership for Young Children, Orange County Schools, and Orange County Head Start).
- _____ I understand that my child will need a current health assessment and immunizations before s/he attends a program.
- _____ I understand that OCS Pre-K is designed to serve at-risk children and that every effort shall be made by me and the OCS Pre-K program to maintain my child's enrollment and participation in the program.
- _____ I understand I am responsible for providing transportation for my child. I understand that transportation is NOT provided for OCS Pre-K.
- _____ I understand that program requirements and my child may be placed on a wait list.

Parent/Guardian Signature: _____ **Date:** _____

I certify that the information given on this application is true, accurate, and complete to the best of my knowledge. I certify that all income has been reported. My signature and submission of requested documentation grants Orange County Schools permission to enter the information into the NC Pre-K State Kids Data System as an application for eligibility into the NC Pre-K Program. I understand this information is being given for receipt of federal and/or state funds. Program staff may verify the information on this application. Deliberate misrepresentation of the information may subject me to prosecution and removal of my child from the program.

Child's Name: _____

Parent/Guardian Signature: _____ Date: _____

Relationship to Child: _____

Thank you for your interest in the OCS Pre-K Program!

