

## 2021-2022 Pre-Kindergarten Enrollment Application

This program is **Only** for families that are economically disadvantaged or homeless.

Application Date	
Parent Name:	Mom   Dad   Other (circle one)
Address:	
	Zip:
Total Household size (# of people in t	the house )   Household Income \$
Email_ For Mom:	<u>Phone</u>
For Dad:	
Child's Name:Age	girl boy
DOB:Age	_
Does your child have an IEP or any Special	Needs? Yes \( \square\) No \( \square\)
Supporting documents to include (checkmark to indicate included):	
— Birth Certificate	
<ul> <li>Copy of a Valid Driver's License/ID (you are providing a color copy of the license.</li> <li>Themba cannot make copies)</li> </ul>	
	illy all documents submitted.(any one of
•	gible members of the household. Only the first and annual household income)
Should you like to share any other thoughts about your childcare needs, please do so below.	

Thank you for completing this Enrollment Application. This is the first step of the enrollment process. After receiving this application, our Enrollment Coordinators will review your application along with your supported documentation, if you meet all conditions of enrollment, you will be notified to complete an enrollment package. <a href="NOTE">NOTE</a>: Completing this application is NOT an indication of acceptance into the program.