

LINCOLN PARISH EARLY CHILDHOOD COMMON APPLICATION FORM

FOR ALL TYPE III CHILDCARE CENTERS, NSECD AND PUBLIC SCHOOLS, AND HEAD START

DATE: _____

PLEASE PRINT

FULL NAME OF CHILD _____
Last First Middle

DATE OF BIRTH _____ **AGE** _____ **GENDER** _____ **RACE *** _____ **SOCIAL SECURITY NUMBER** _____

* 0 = White 1 = Black 2 = Hispanic 3 = Asian 4 = Native American/Alaskan Native 5 = Hawaiian/Pacific Islander

RESIDENCE _____
Hwy, Street (w/ Apt. or House #) City Parish State Zip Code

MAILING ADDRESS _____
P.O. Box / Street (w/ Apt. #) City Parish State Zip Code

FATHER _____
Last First Middle Place of employment

Father's phone numbers: Home _____ Work _____ Cell _____

MOTHER _____
Last First Middle Place of employment

Mother's phone numbers: Home _____ Work _____ Cell _____

GUARDIAN
(If not either parent) Last First Middle Place of employment

Guardian's phone #'s: Home _____ Work _____ Cell _____

EMERGENCY CONTACT _____
Last First Middle

Emergency Contact #'s: Home _____ Work _____ Cell _____

CHILD LIVES WITH: Both Parents Mother Father Guardian _____
(relationship to child, such as aunt, grandmother, etc.)

First language learned by student: _____ **Language other than English used at home:** _____ **Language student uses most often:** _____

Physician _____ **Dentist** _____

Please list any of the following: Current medications, medication allergies, food allergies, or chronic health concerns.

► **PARENT / GUARDIAN SIGNATURE** _____

.....(For Office Use Only).....

Nurse Approval _____ Date _____

**LINCOLN PARISH 2017-2018 EARLY CHILDHOOD COMMON APPLICATION FORM
FOR ALL TYPE III CHILDCARE CENTERS, NSECD AND PUBLIC SCHOOLS, AND HEAD START**

MUST HAVE TO REGISTER & ATTEND PUBLIC OR NSECD SCHOOL OR HEAD START:

- Birth Certificate/Legal Guardianship Income verification (Required by NSECD, LA4, and Head Start)
- Social Security Card Address Verification (Recent Documents from 2 Different Sources—public schools & Head Start)
- Up-to-date Immunization Record

Different sites may require additional information.

NOTE: Submission of this application does NOT guarantee placement of your child!

Remember, placement of pre-K aged children is based primarily on parent choice! If your first choice does not have enough space to accommodate your child, you should take your application to your next choice!

PLEASE INDICATE YOUR 1ST, 2ND, AND 3RD CHOICES BELOW:

- _____ Bethel Christian School – accepts CCAP (Birth-2)
- _____ Candeland – accepts CCAP (Birth-4)
- _____ Emmanuel Baptist Church Preschool – accepts CCAP (Birth-4)
- _____ Happy Days – accepts CCAP (Birth-4)
- _____ Head Start (3s & 4s)
- _____ Kidz-n-Harmony – accepts CCAP (Birth-4)
- _____ LA Tech Early Childhood Education Center – accepts CCAP (3s & 4s)
- _____ Lifechurch.LA (formerly South Parkway)- accepts CCAP, Military, and NSECD (Birth-4)
- _____ Lincoln Parish Early Childhood Center (LPECC) (4s only)
- _____ LPECC South (4s only)
- _____ New Living Word – accepts CCAP and NSECD (Birth-4)
- _____ Shining Stars – accepts CCAP (Birth-4)
- _____ String-a-Long – accepts CCAP (Birth-4)
- _____ The Learning Junction – accepts CCAP (Birth-4)

Is your child served by Early Steps? Yes No

Does your child have an IFSP? Yes No

Does your child have an IEP? Yes No

List any special accommodations needed

This application must be completed and all documentation copied/available before submitting to the site of your choice.