

Please complete the following information necessary to enter your child into our data base. Please note that if there are more child and/or adult spaces than necessary for your family, only complete the proper number for your household. If there are not enough child and/or adult spaces, please add the information on a separate sheet of paper. Once eligibility has been confirmed required paperwork will need to be submitted for your child to be enrolled into the preschool program.

*Please Print:*

Number of children in household: \_\_\_\_\_ Number of adults in household: \_\_\_\_\_  
(Immediate members only)

Address: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupancy Status (rent, own, double-up, campsite, foster care, unsheltered, ect.): \_\_\_\_\_

Occupancy Year: \_\_\_\_\_ School District: \_\_\_\_\_

Child One Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- Native Hawaiian/Pacific Islander
- Asian/Asian American
- American Indian/Alaska Native

- Black/African American
- Arab/Middle Eastern
- White/Caucasian
- Hispanic

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Child Two Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- Native Hawaiian/Pacific Islander
- Asian/Asian American
- American Indian/Alaska Native

- Black/African American
- Arab/Middle Eastern
- White/Caucasian
- Hispanic

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Child Three Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- Native Hawaiian/Pacific Islander
- Asian/Asian American
- American Indian/Alaska Native

- Black/African American
- Arab/Middle Eastern
- White/Caucasian
- Hispanic

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Child Four Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> Asian/Asian American             | <input type="checkbox"/> Arab/Middle Eastern    |
| <input type="checkbox"/> American Indian/Alaska Native    | <input type="checkbox"/> White/Caucasian        |
|   | <input type="checkbox"/> Hispanic               |

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Child Five Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> Asian/Asian American             | <input type="checkbox"/> Arab/Middle Eastern    |
| <input type="checkbox"/> American Indian/Alaska Native    | <input type="checkbox"/> White/Caucasian        |
|   | <input type="checkbox"/> Hispanic               |

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Child Six Name (First, Middle initial, Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Race (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Native Hawaiian/Pacific Islander | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> Asian/Asian American             | <input type="checkbox"/> Arab/Middle Eastern    |
| <input type="checkbox"/> American Indian/Alaska Native    | <input type="checkbox"/> White/Caucasian        |
|   | <input type="checkbox"/> Hispanic               |

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Adult One Name (First and Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

English Literacy Level:  No concerns  Some concerns  
 High concerns  Cannot read

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Interpreter Needed?  Yes  No

Please list relationship to each child (parent, step parent, foster parent, grandparent, registered care giver, aunt/uncle, family friend, neighbor, sibling, other relative, other)

Child One: \_\_\_\_\_ Child Two: \_\_\_\_\_ Child Three: \_\_\_\_\_

Child Four: \_\_\_\_\_ Child Five: \_\_\_\_\_ Child Six: \_\_\_\_\_

Adult Two Name (First and Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

English Literacy Level:  No concerns  Some concerns  
 High concerns  Cannot read

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Interpreter Needed?  Yes  No

Please list relationship to each child (parent, step parent, foster parent, grandparent, registered care giver, aunt/uncle, family friend, neighbor, sibling, other relative, other)

Child One: \_\_\_\_\_ Child Two: \_\_\_\_\_ Child Three: \_\_\_\_\_

Child Four: \_\_\_\_\_ Child Five: \_\_\_\_\_ Child Six: \_\_\_\_\_

Adult Three Name (First and Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

English Literacy Level:  No concerns  Some concerns  
 High concerns  Cannot read

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_

Interpreter Needed?  Yes  No

Please list relationship to each child (parent, step parent, foster parent, grandparent, registered care giver, aunt/uncle, family friend, neighbor, sibling, other relative, other)

Child One: \_\_\_\_\_ Child Two: \_\_\_\_\_ Child Three: \_\_\_\_\_

Child Four: \_\_\_\_\_ Child Five: \_\_\_\_\_ Child Six: \_\_\_\_\_

Adult Four Name (First and Last): \_\_\_\_\_

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

English Literacy Level:  No concerns  Some concerns  
 High concerns  Cannot read

Main Language Spoken: \_\_\_\_\_ Other Language(s) Spoken: \_\_\_\_\_



# Washtenaw County Head Start and Great Start Readiness Program Collaboration



To be enrolled into the preschool program you will need to submit the following paperwork:

- Proof of residency – driver's license or state id, recent utility bill, or copy of lease agreement
- Child's Birth Certificate – also may use hospital record or passport
- Proof of Income – previous year W-2 or 1040 form, letter from employer, or 2 most recent pay stubs
- Completed physical – must be 4 year old physical signed by doctor
- Immunization Record
- Risk Factor Documentation

Please note: In order for a child's application to be considered for the 2011-2012 school year during the open enrollment period, the school office must have this completed student application on file by 4:00 p.m. on Friday, March 18, 2011. The date (and time) in the "For Office Use Only" box will mark the date and time received – not the parent/guardian signature and date. When open enrollment ends, applications will be counted. If there are fewer applications than openings at that time, all applications received in the open enrollment period will be accepted. If there are more applications than openings at that time, a lottery will be held to determine who will be enrolled and who will be placed on a waiting list. Within two weeks after open enrollment ends, parents will be officially notified by mail of their child's status for enrollment. Preference is given to siblings of students already enrolled at the school for any available openings. Applications received after the open enrollment period are accepted on a first come, first served basis for any remaining openings or put on a waiting list if no openings remain. After receiving official notification of their child's acceptance to New Beginnings Academy Preschool, parents are expected to complete the enrollment forms, submit copies of the child's birth certificate, most recent immunization record and health appraisal, proof of residency, proof of income, and risk factor documentation. If this information is **not** received by the specified date in the acceptance letter, the student will be dropped from the acceptance list to allow room for a student who is on the waiting list. If there are any questions about this process, parents are encouraged to contact the New Beginnings Academy's office personal at 481-9001.

**AN IMPORTANT NOTICE...YOUR CHILD MUST BE IN ATTENDANCE ON THE FIRST DAY OF SCHOOL**, or have an excused absence on that first day. If your child is not present or excused, the preschool will remove your child from enrollment and the opening will be made available to those who are on the waiting list. As a courtesy to those who may be on the waiting list, we ask that you give the preschool notice if you do not intend to send your child to the preschool.

New Beginnings Academy Preschool is a public school academy. New Beginnings Academy Preschool admits students of any race, color, religion, national, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, religion, national and ethnic origin in administration of its educational policies, admissions policies, and other school-administered programs.

It is the parents' responsibility to notify the school of address and/or phone number changes.

**CHILD MUST BE 4 YEARS OLD BY DECEMBER 1, 2011 TO ENROLL IN NEW BEGINNINGS ACADEMY PRESCHOOL**

2011-2012  
Preschool Enrollment

**FOR OFFICE USE ONLY:**  
SIBLING: \_\_\_\_ YES  
DATE/TIME RECEIVED:  
\_\_\_\_\_  
INITIALS: \_\_\_\_\_