

# 2021-22 Voluntary Pre-K Student Application

**\*\*Must be age 4 on or before August 15th, 2021**

The attached (white) *Application for Income Eligibility* is a universal form required for all families in Tennessee applying for the Voluntary Pre-K program. Both forms (color and white) must be completed. Enrollment is based on income levels set by the Department of Health and Human Services.

Proof of income documentation or services MUST be submitted with application.

**Parents are responsible for transportation - VPK students do NOT ride school buses.**

Name of Student: \_\_\_\_\_ Parent(s) Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Address: \_\_\_\_\_

Female \_\_\_ Male \_\_\_ E-mail: \_\_\_\_\_ Cell/Home \_\_\_\_\_

## EMERGENCY CONTACTS: (Must list 2 other than parent)

1) Contact's Name -  
Contact's Address -  
Contact's Phone Numbers - home \_\_\_\_\_ cell \_\_\_\_\_ work \_\_\_\_\_  
Contact's Relationship to Child -

2) Contact's Name -  
Contact's Address -  
Contact's Phone Numbers - home \_\_\_\_\_ cell \_\_\_\_\_ work \_\_\_\_\_  
Contact's Relationship to Child -

### Please check any that apply

\_\_\_\_\_ child's parent died during or from an injury sustained while serving in the armed forces

\_\_\_\_\_ child has a current IEP

\_\_\_\_\_ another language is spoken in our home

\_\_\_\_\_ child is in state custody

\_\_\_\_\_ child is in a foster home

\_\_\_\_\_ child is educationally at-risk for the following reason: (explain) \_\_\_\_\_

### PreK Registration Dates and Times

April 8- Camden Elementary School 4:00-7:00 pm (North door entrance)

April 29- Camden Elementary School 4:00-7:00 pm (North door entrance)

OR- You may call 731.584.6111 to schedule an appt. for the dates/times listed below. Ask for Amy Davis.

April 30- Board of Education 1:30-3:30 pm

May 6- Board of Education 9:00-11:00 am

**All eligible students and a waiting list will be selected by random drawing. - Notification in July**

***The Benton County School System does not discriminate on the basis of race, color, national origin, gender, disability, or age in its programs and activities.***

\_\_\_\_\_ income verification

\_\_\_\_\_ copy of birth certificate

\_\_\_\_\_ copy of social security card

\_\_\_\_\_ well child doctor form

\_\_\_\_\_ immunization record