



The Family Resource Center



Children must be four years of age before August 31, 2022, but cannot have reached their fifth birthday and must meet at least **one of the criteria** listed below and **live within USD 250 school district boundaries.**

- Income qualifies for participation in the federal free or reduced lunch plan
- Developmentally or academically delayed based on assessments
- Custodial parent is single (unmarried) at time of enrollment
- Have a parent that was a teen at the time of the child's birth
- Have a parent lacking a high school diploma or GED
- Referral from DCF (Dept. of Children and Families)
- Child qualifies for migrant status
- Potty trained

****We also have a limited number of spots that do not require your child to meet any of the above requirements.****

Due to eligibility requirements, changes to the above information may affect your child's placement in the program. If any changes occur before the 1st day of school, please contact The Center as soon as possible.

If you have any questions about our Pre-K programs or eligibility please contact
Tasha at The Center 235-3150.

Please complete the application on the back and return it to:
The Center
1600 N. Walnut
Pittsburg, Kansas 66762

**Application for Attendance
4 year old Pre-K Programs
2022 – 2023 School Year**

Parents:
Please select 1st and 2nd preference:
____AM 8:00a-11:00a
____PM 12:00p-3:00p
**Your 1st selection is not a guarantee.

Child's Name _____ Social Security # _____
Child's Date of Birth _____ Gender: Male Female
Child lives with: Both parents Father Mother Foster Parent(s) Other _____
Marital Status: Married Divorced Separated Widowed Single

Mother's Name _____ Mother's Date of Birth _____
Highest Education Level _____ (please circle) High School Graduate GED Email address: _____
Father's Name _____ Father's Date of Birth _____
Highest Education Level _____ (please circle) High School Graduate GED Email address: _____

Street Address _____ City _____
Home/Message Phone _____ Parent's Work Phone _____

Because children must meet certain eligibility criteria, the following information is needed
If child has a case number for Food Stamps, TAF or FDPIR, please list here _____
If child has one of above numbers, skip the following income information.

PART 1
 Check box if this application is for a child who is the legal responsibility of a welfare agency or court. List his/her monthly personal use income. If the foster child has no personal use income, write "0". \$ _____ Skip Part 2.

PART 2	Monthly Earnings from work (before deduction)	Monthly Welfare, Child Support, Alimony	Monthly Pension Payments, Retirement, Social Security, Other Income	Monthly Temporary Income: Strike Benefits, Unemployment, Workman's Comp
List the names of ALL Household Members				

Is your child receiving any special services (i.e. speech therapy, learning disabilities, mentally handicapped, Discovery or any other services)?
YES NO If you circled YES please list _____
Do they have an IEP (Individual Education Plan)? YES NO
Does your child qualify for migrant status? YES NO (If yes, please include a copy of the Certificate of Eligibility.)
What language is spoken in your home? English Other (Specify) _____
Is your child potty trained? YES NO

RACE & ETHNICITY
(Note: Both Part A & Part B of the question must be answered.)

- Part A: Is this student Hispanic/Latino?** (Choose only one)
 No, not Hispanic/Latino
 Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)
- Part B: What is the student's race?** (Choose one or more)
 American Indian or Alaska Native (A person having origins in any of the original peoples of North or South American (including Central America), and who maintains tribal affiliation or community attachment.)
 Asian (A person having origins in any of the original peoples of the Far East, Southeast, Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
 Black or African American (A person having origins in any of the black racial groups of Africa.)
 Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
 White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

Signature of Parent/Guardian: _____ Date: _____

Complete and Return to:
The Center
1600 N. Walnut
Pittsburg, KS 66762

2022 Child Care/Pre-k Application

First Parent:
 Name: _____ Birthdate: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email Address: _____ Soc Sec #: _____
 Employer Name: _____
 Work Phone #: _____ Cell #: _____
 Highest level of Education completed: _____

CENTER USE ONLY

APP FEE DATE: _____
 STAFF INITIALS: _____
 ADMISSION DATE: _____
 ROOM: _____
 SCHEDULE: _____
 COMMENTS: _____

Second Parent:
 Name: _____ Birthdate: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email Address: _____ Soc Sec #: _____
 Employer Name: _____
 Work Phone #: _____ Cell #: _____
 Highest level of Education completed: _____

Child: Name: _____ Birthdate: _____
 Address: _____ City: _____ State: _____
 Home Phone #: _____ Social Security #: _____
 Sex: Male Female Ethnicity: Hispanic or Latino Non-Hispanic
 Race: White Black/African Amer. Amer. Indian or Alaskan Native
 Asian Native Hawaiian or Other Pacific Islander
 What language is spoken in your home? English Other (Specify) _____

Schedule: child care only
 IN OUT
 M _____ drop-in only
 T _____
 W _____ preschool only
 Th _____ AM PM
 F _____ child care/prek

List the names of ALL Household Members	Monthly Earnings from work (before deductions)	Monthly welfare child support, etc	Monthly Social Security, SSI, etc	All other Income

Emergency Contact/ Authorized Pick-up People:
 Name: _____
 Address: _____
 Phone #: _____ Second Phone #: _____ Relationship to child: _____
 Emergency Contact: Yes No Authorized to Pick up: Yes No

Emergency Contact/ Authorized Pick-up People:
 Name: _____
 Address: _____
 Phone #: _____ Second Phone #: _____ Relationship to child: _____
 Emergency Contact: Yes No Authorized to Pick up: Yes No

Signature _____

Date: _____



The Family Resource Center

Dear Parent,

Thanks so much for your inquiry about child care and preschool services available at **The Family Resource Center**.

If you are interested in having your child attend The Center's child care or preschool--or both--please fill out the application completely and return it with a \$20 non-refundable application fee to 1600 N. Walnut, Pittsburg, KS 66762. Both the application and the fee are necessary in order to enroll a child or be placed on the waiting list. Information on the application is used to determine your child's eligibility in programs offered at The Center.

Upon receipt of your application, we will confirm availability or space with you and provide several forms for you to complete--health records, emergency contacts, etc. If there is no space available, your name will be put on a waiting list by your application date.

If you have any questions at all, please call **235-3150**. We hope you will choose to be a part of this fantastic place especially designed for kids!!

Sincerely,

Tasha McCoy
Child Care Coordinator

1600 N. Walnut • Pittsburg, KS 66762 • 620-235-3150

Board of Directors

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2022-2023 PRESCHOOL ENROLLMENT

From: Tasha McCoy, Child Care Coordinator

RE: Enrollment for Fall 2022 Preschool

Date: February 22, 2022

Listed below is the other preschool option for children 3 to 5 years of age that **do not qualify for or receive a grant funded spot.**

Please note your 1st and 2nd preference regarding AM or PM. If you would like more information or would like to visit the preschool, please contact The Center at 235-3150. For enrollment please fill out an application along with this form and return both, along with the \$20 application fee to 1600 N. Walnut.

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I would like to enroll _____

Date of Birth _____

I prefer:

Monday - Friday

(3-5 years old)

\$150 per month

_____ AM

_____ PM

Preschool plus Child Care Prices are as follows:

Monday - Friday Preschool & Full Time Child Care: \$150 per week

Monday - Friday Preschool & Part Time Child Care: \$160 per month + \$4.50
per contracted hour

Parent's Signature _____

Date: _____