

PA PRE-K COUNTS APPLICATION

This information is confidential to the PA Pre-K Counts program.

Date form Completed:

Last Name (Child)	First Name (Child)	Middle Initial

Child's Date of Birth / /	Age 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	Household (Family) size

Primary Language	Family Type
<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other _____ (Please specify)	<input type="checkbox"/> One Parent <input type="checkbox"/> Two Parent <input type="checkbox"/> Foster <input type="checkbox"/> Child living with Relative <input type="checkbox"/> Other _____ (Please specify)

Street Address		County	
City		State PA	Zip Code
Home Telephone:	Work Phone:	Email Address:	

Household Income (required) check box:

- | | | |
|---|--|--|
| <input type="checkbox"/> Less than \$5,000 | <input type="checkbox"/> \$5,001 - \$10,000 | <input type="checkbox"/> \$10,001 - \$15,000 |
| <input type="checkbox"/> \$15,001 - \$20,000 | <input type="checkbox"/> \$20,001 - \$25,000 | <input type="checkbox"/> \$25,001 - \$30,000 |
| <input type="checkbox"/> \$30,001 - \$35,000 | <input type="checkbox"/> \$35,001 - \$40,000 | <input type="checkbox"/> \$40,001 - \$45,000 |
| <input type="checkbox"/> \$45,001 - \$50,000 | <input type="checkbox"/> \$50,001 - \$60,000 | <input type="checkbox"/> \$60,001 - \$70,000 |
| <input type="checkbox"/> \$70,001 - \$100,000 | <input type="checkbox"/> More than \$100,000 | |

Actual Annual Verified Gross Household (Family) Income: _____
 (Attach copies of documents used to verify income prior to enrollment)

Family income is **at or below 300% of federal poverty level** (Required Risk factor). Consider all sources of income. See end of document for income chart relative to family size. (Must be verified prior to enrollment)

Other Child Eligibility Risk Factor Criterion (Must check all that apply)

- Behavioral Supports:** A child who was referred to PA Pre-K Counts from an appropriately credentialed health or mental health practitioner who is not employed by the PA Pre-K Counts program; a child who is receiving mental health treatment. Additional verification beyond the interview is required.
- Child Protective Services:** A child who is a foster child, a kinship care child or receiving Children and Youth services
- Education level of guardian:** does not have a high school diploma or GED or post-secondary degree.
- English Language Learner:** A child whose first language is not English and who is in the process of learning English is considered an English Language Learner.
- Homeless:** A child who lacks a fixed, regular, and adequate nighttime residence due to one of the following:
 - A. Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, or camping grounds due to the lack of alternative accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement;
 - B. Children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings;
 - C. Children who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- Incarcerated Parent:** A child for whom one of the child's parents is currently in prison
- Individualized Education Plan (IEP):** A child who is currently enrolled in the Preschool Early Intervention program with an active IEP. Verification would be a copy of the IEP or other source of documentation from the parent or Early Intervention provider.
- Migrant (non-immigrant)/Seasonal Student.** A migrant child has moved from one school district to another in order to accompany or to join a migrant parent or guardian, who is a migratory worker or migratory fisher, within the preceding 36 months, in order to obtain temporary or seasonal employment in qualifying agricultural or fishing work including agri-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
- Teen mother:** A child whose mother was under the age of 18 when the child was born

To the best of my knowledge, the information provided is accurate. I understand that I may be asked to verify or substantiate information provided.

Parent/Guardian Signature

Date

Parent/Guardian Name – Please Print

Staff Verifying Income and Risk Factors Signature

Date

Staff Verifying Income - Please Print

See Announcement ELS/PAPKC #1 for further definitions of Risk Factors and steps to verify income.

Federal Income Guidelines for 2009

<http://aspe.hhs.gov/poverty/09poverty.shtml>

[*Federal Register Notice, January 23, 2009*](#) (Volume 74, Number 14)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Office of the Secretary
Annual Update of the HHS Poverty Guidelines
AGENCY: Department of Health and Human Services.
ACTION: Notice.

SUMMARY: This notice provides an update of the HHS poverty guidelines to account for last calendar year's increase in prices as measured by the Consumer Price Index.

DATES: Effective Date: Date of publication, unless an office administering a program using the guidelines specifies a different effective date for that particular program.

The 2009 Poverty Guidelines for the 48 Contiguous States and the District of Columbia			
Persons in family	100% of Poverty	200% of Poverty	300% of Poverty
1	\$ 10,830	\$ 21,660	\$ 32, 490
2	\$ 14,570	\$ 29,140	\$ 43,710
3	\$ 18,310	\$ 36,620	\$ 54,930
4	\$ 22,050	\$ 44,100	\$ 66,150
5	\$ 25,790	\$ 51,580	\$ 77,370

For families with more than 5 persons, add \$3,740 for each additional person.