

# Manistee County Preschool Scholarship Program

## Interest Form 2018-2019

**CHILD INFORMATION** PLEASE PRINT

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F  
 Parent/Guardian Contact Name: \_\_\_\_\_ Home Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Date child will begin school: \_\_\_\_\_  
 Primary language spoken in the home/ Idioma principal se habla en el hogar: \_\_\_\_\_  
 Child Ethnicity:  African American  Hispanic/Latino  Native American  White  Other

Does your child receive services, have an Individual Family Service Plan (IFSP) or have an Individualized Education Program (IEP)? Check all that apply below.

Speech  Physical Therapy  Occupational Therapy  IFSP  IEP

Is there any additional information to share about your child? (i.e. disability, medical concerns, allergies, etc. ) Attach a separate sheet if necessary. \_\_\_\_\_

**PRESCHOOL PREFERENCE**- Please check your preferred preschool program.

	<u>No Cost</u>		<u>Tuition Based</u>
	Manistee Great Start Readiness Program (GSRP Madison Elementary		Manistee Area Public Schools Preschool- Madison Elementary
	Manistee Head Start (Manistee Child Development Center)		Manistee Catholic Central Preschool
	Brethren Great Start Readiness Program (GSRP)		Trinity Lutheran Preschool
	Kaleva Head Start (Northern Manistee Child Development Center)		Onkama Leaps and Bounds Early Childhood Education Program- Onkama School ECEP
	Bear Lake Great Start Readiness Program (GSRP)		Great Beginnings Child Development Center-Bear Lake
	Next Generation Learning Center Great Start Readiness Program (GSRP)		Next Generation Learning Center

**NOTE:** There is a possibility that your preschool does not meet the quality star ratings of three stars or higher used to determine eligibility for scholarships. Please check to see if your preschool is eligible for scholarships by checking this website: [www.GreatStartToQuality.org](http://www.GreatStartToQuality.org) Click on the families tab and search for your preschool of choice.

**HOUSEHOLD INFORMATION**

Number of adults living in your home? \_\_\_\_\_ Number of children living in your home? \_\_\_\_\_

Do you receive Department of Health & Human Services (DHHS) childcare reimbursement, DHHS Cash Assistance, or disability payment (SSI)? Yes No

Where do you currently live? \_\_\_Rent or Own \_\_\_Emergency Shelter \_\_\_Family/Friend \_\_\_Foster Care \_\_\_Unsheltered \_\_\_Camper/Trailer \_\_\_Hotel/Motel \_\_\_Other

Is transportation available for the child to attend preschool? Yes No

Are you currently employed? Parent/Guardian #1: Yes No Parent/Guardian #2: Yes No

**ANNUAL INCOME**

Yearly household income before taxes: \_\_\_\_\_

Number of people in household: \_\_\_\_\_

**NOTE:** please provide a copy of your recent tax return or W-2 form for supporting evidence for your application to be considered.

**RELEASE OF INFORMATION**

*I authorize my preferred preschool, Great Start Readiness Program (GSRP), Head Start, and Manistee County Early Childhood Preschool Scholarship Program Committee to share my application information internally. If I am found to be eligible for GSRP or Head Start I will be contacted by a representative.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION MUST INCLUDE: Only complete applications will be considered**

- Front page of most recent tax return or W2 form
- Proof of child's age

**PLEASE RETURN TO:**

Preferred Preschool or Manistee County Preschool Scholarship Program - 395 Third St. Manistee, MI 49660

**DO NOT WRITE WITHIN BOX. FOR STAFF USE ONLY-** Staff, please Initial and Date where appropriate

Interest Form Received: _____	Entered in Database: _____
Head Start Reviewed: _____	Head Start Eligible: Yes No
GSRP Reviewed: _____	GSRP Eligible: Yes No
Student placed in Head Start/GSRP: Yes No	If Yes, which one: _____
	If No, reason why: _____
Head Start/GSRP supports this placement: _____	
Reviewed By: _____	
(Pre School Scholarship Rep. Date/Initials)	(GSC Coordinator Date/Initials)
	(Faxed/mailed to Agency/Date)