

Manistee County Early Childhood Preschool Scholarship Program
Manistee Intermediate School District
772 East Parkdale Avenue
Manistee, MI 49660

May 18, 2020

Dear Parents, Guardians and Child Care Providers,

Thank you for your interest in the Manistee County Early Childhood Preschool Scholarship Program. Early Childhood Programs are important to young children as they get ready for school and life. The Scholarship Committee can only fund partial scholarships at this time due to limited funding. However, additional funding may be available through the Michigan Department of Health and Human Services' Child Development and Care (CDC) Program.

There are a number of preschool programs in Manistee County including FREE choices for families that qualify. All programs are listed on the attached Manistee County Preschool Scholarship Program Interest Form. We hope that all of these options will help you decide which choice is best for your family.

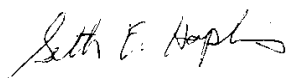
Online applications are or will soon be available at: www.manisteefamily.org

To apply for a scholarship, follow these steps:

- Identify which preschool option is best for your family. Note that some programs may be free to those who qualify and others charge tuition.
- Look into other sources of financial assistance including the Michigan Department of Health and Human Services' Child Development and Care (CDC) Program. Manistee MDHHS (231) 723-8375
Fill out the attached back of this letter and the interest form and submit to Seth Hopkins, Manistee Intermediate School District, 772 East Parkdale Avenue, Manistee, MI 49660 or email: shopkins@manistee.org. You may also submit the form to your preferred preschool.
- The Scholarship Committee will review your application.
- The Scholarship Administrator will contact the school and family about a scholarship award.

We are here to help. Any questions please email shopkins@manistee.org or call (231)-690-1037.

Sincerely,



Seth Hopkins
Administrator
Manistee County Early Childhood Scholarship Program

(Please fill out application front and back)

Rev. 5/18/20

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FREE Preschool Options

Please call about FREE preschool options

GSRP (Great Start Readiness Program)- Free opportunity for 4 yr. old children. Busing available.
Head Start- Free opportunity for 3 & 4 yr. old children. Busing available.

Check which schools were called:

- GSRP**- MAPS Manistee Area Public Schools (231) 398-9466
- GSRP**- Next Generation Learning Center (231) 398-6718
- GSRP**- Bear Lake, Great Beginnings (231) 864-3133
- GSRP**- Brethren, Four Stars Preschool (231) 477-5353 ex2206
- Head Start**- Next Generation Learning Center (231) 398-6718
- Head Start**- FIVECAP, Manistee Child Development Center (231) 723-2231
- Head Start**- FIVECAP, Northern Manistee Child Development Center (231) 362-2444
- Head Start**-Bear Lake Telamon (231) 864-3342

I verify that I have NOT chosen FREE Preschool because:

- Income Eligibility- (Income is above FREE option guidelines)
- Travel Distance
- Parent Choice
- FREE Preschool is full
- Other _____

Signature _____ **Date:** _____

If you have not chosen a free preschool option, and still want to apply for a scholarship, please fill out the next page (Front and Back).

Manistee County Preschool Scholarship Program

Interest Form 2020-2021

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>FREE</u>		<u>Tuition Based</u>
GSRP -Manistee Area Public Schools Preschool				Manistee Area Public Schools Preschool- Madison Elementary
Head Start -Manistee Child Development Center				Manistee Catholic Central Preschool
GSRP - Brethren Great Start Readiness Program				Trinity Lutheran Preschool
Head Start -Northern Manistee Child Development Center				Onkama Leaps and Bounds Early Childhood Education Program- Onkama School ECEP
GSRP - Bear Lake Great Start Readiness Program				Great Beginnings Child Development Center-Bear Lake
GSRP, Head Start - Next Generation Learning Center				Next Generation Learning Center
Head Start -Bear Lake Telamon				

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 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.

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 (i.e birth certificate, official state immunization record)

PLEASE RETURN TO:

Preferred Preschool or Manistee County Preschool Scholarship Program – 294 River St., Suite 4. 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)