



HOUSTON INDEPENDENT SCHOOL DISTRICT

2015-2016 Prekindergarten

INTENT TO APPLY

S. 29.153 of the Texas Education Code lists qualifications of children for Prekindergarten programs. The child whose name appears below is applying to be considered for entry into the Houston Independent School District's Prekindergarten program. Prekindergarten classroom assignment will be based on the child's home language. Please complete the *Intent to Apply* document by printing the required information.

Criteria for Admittance:

- Child will be 4 years of age on or before September 1, 2015.
- Child is a resident of the Houston Independent School District.
- Child meets immunization requirements, and also meets at least one of the following conditions:
 - Child is unable to speak and comprehend the English language (Home Language Survey will be completed at the campus), or
 - Child is economically disadvantaged (See chart below, documented foster child, or food stamp case number), or
 - NSLP to include all children who meet any eligibility criteria for Head Start, not only those who meet the low-income eligibility criteria for Head Start. The TEC, §5.001(4), defines educationally disadvantaged as "eligible to participate in the national free or reduced-price lunch program." Consequently, all children who are eligible for Head Start are eligible for free prekindergarten, based on their eligibility for the NSLP. [1][1] Public Law 110-134, which amended 42 USC, §1758, or
 - Child is homeless, as defined by [42 USC 11434a], or
 - Child is or ever has been in the conservatorship of the Department of Family and Protective Services following an adversary hearing held as provided by Section 262.201, Family Code, or
 - Child of an active duty member of the armed forces; including the state military forces or a reserve component of the United States, or the child of an armed forces member who was injured, killed, or missing in action while serving on active duty (refer to Article 6 of House Bill 1).

Child's Name				
Child's SSN				
Child's Birthdate				
Child's Age on September 1				
Total Number in Household				
Parent's Name				
Address	Street Address			
	Address Line 2			
	City		State	
	Zip/Postal Code			
Phone Number				
Household Member	Job Income	How Paid?	Other Income	How Paid?
1.	\$	YR MO WK	\$	YR MO WK
2.	\$	YR MO WK	\$	YR MO WK
3.	\$	YR MO WK	\$	YR MO WK

I understand the school officials may verify the information on this Intent to Apply document. If investigation indicates false information has been provided and the child is not eligible to participate in the program, the child may be withdrawn to make room for a child who is eligible. I certify that all the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of funds and that deliberate misrepresentation of the information may subject me to prosecution under applicable state laws.

THIS FORM DOES NOT GUARANTEE ADMISSION INTO THE PREKINDERGARTEN PROGRAM. PERMANENT RECORD FORMS AND AN OFFICIAL PREKINDERGARTEN APPLICATION MUST BE COMPLETED AT LEAST TWO MONTHS PRIOR TO THE FIRST DAY A CHILD ATTENDS SCHOOL.

Parent's Signature

Date

TO BE COMPLETED BY SCHOOL PERSONNEL

APPROVAL BASED ON:

- Limited English Proficient
 - Home Language Survey must indicate child hears/speaks a language other than English at home.
 - Child has been tested with oral Language assessment (Attach proof of assessment and scores. A score of Non-English Speaking OR Limited English Speaking indicates eligibility as LEP.)
 - Parent must sign Notification of Enrollment in Bilingual/ESL Program.
- Homeless
 - Child lacks a fixed, regular, and adequate residence.
 - Primary nighttime residence is a supervised public or private shelter designed to provide temporary living accommodations, or an institution that provides temporary residence for individuals intended to be institutionalized.
 - Primary nighttime residence is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
- Proof of Income Eligibility
 - Current paycheck stub, current pay envelope, letter from employer stating gross wages paid and how often they are paid, unemployment, worker's compensation or disability payment stub, current SNAP, or TNAF case number for free meals
 - Acceptable documentation for self-employment income include: business or farming documents, such as ledger books and/or self-issued paycheck stub, last year's tax return
- Military Member's Child
- Foster Care
- NSLP to include all children who meet any eligibility criteria for Head Start

(Attach copies of required documentation)

ALTERNATE STATE ID: _____

HISD PERMANENT ID: _____

- Birth Certificate (proof of age required)
- Proof of Residency (utility bill, mortgage statement, etc. required unless homeless)
- Immunization Records (clinic record, doctor's statement, or proof of exempt status required)

Signature of Principal or Designee

Date

_____ Approved

_____ Rejected