

Early Childhood Center
212 Main St., Room 102
Northampton, MA 01060
(413) 587-1471 FAX (413) 587-1318
Email: efrank@northampton-k12.us

PRESCHOOL APPLICATION

2018-2019 SCHOOL YEAR

DEADLINE: _____

Office use Only

Date Received: _____

Confirmation: _____

Registered: _____

Preschool Program Information		
AM Session (3-year olds) 8:50 am - 11:20 am	PM Session (4 year olds) 12:20 pm - 2:50 pm	Full Day Option (4-year olds) 8:50 am - 2:50 pm

Child's Information:

Child's full name: _____

Date of Birth: _____ Gender: Male Female _____

Address: _____

Mailing (if different) _____

<p>Are you interested in the Full-day 4-year old program? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>To be filled by lottery if there are more applicants than available spaces</i></p>

Parent Information:

Parent #1: _____

Phone: _____ Email: _____

Parent #2: _____

Phone: _____ Email: _____

Address if different from student: _____

Information about your family:

How many people live in your household? _____

How many children do you have and what grades and schools do they attend? _____

Is your preschool child currently attending Head Start, or another childcare or preschool program?

YES NO Program Name: _____

Did a physician or social worker recommend that you apply for preschool? YES NO

Do you speak a language other than English in your home? YES NO _____

Are you an immigrant or refugee (within past 10 years)? YES NO

What else would you like us to know about your child? _____

Do you have any concerns about your child's development? _____

Tuition & Income Information:

Please call us if you need help with the forms and documents - we are happy to help!

- Tuition fees are paid for typically developing children. Children with special needs are free.
- Fees are based on family size and income (see monthly income chart below)
- Fees range from \$0-\$60 per week for the half-day program and \$0-\$120 per week for the full-day program. Full fee is \$60/week for MTWTh half-day and \$120/week for MTWTh full day.
 - REDUCED FEE:** If your total gross income falls into a category that is less than the full fee amount, please check the boxes below and submit pay stubs if necessary
 - DOCUMENTATION:** a) if you qualify for public assistance, check the box(es); b) if not, paystubs for each working parent/guardian must be attached to this form or submitted via email
 - PROCESS:** Once we receive your documents, we will determine your fee which will be shown in the acceptance letter that will be mailed to you.
- A Deposit in the amount of one month's tuition is due at the time of Registration and will be applied to your first bill. The deposit is non-refundable if the child does not attend our program.

Tuition Options:

- I agree to pay the **full tuition** equal to \$60 week or \$120 week (full day)
- I would like to be considered for free or reduced tuition (CHECK ONLY ONE):
 - a. ___ Direct Certification: My family already income-qualifies for a public assistance program
 - Food Stamps/SNAP Fuel Assistance Free/Reduced School Lunch
 - Subsidized Housing Transitional Aid to Needy Families (TANF/TAFDC)
 - OR**
 - b. ___ Reduced Fee: I attach 4 weeks of paystubs for each working parent in the home.

Sliding Fee Scale for Preschool Tuition based on Family Size and Income						
GROSS MONTHLY INCOME						
					Weekly Fee	Weekly Fee
Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	HALF-DAY	FULL-DAY
\$0-1540	\$0-1675	\$0-1900	\$0-2150	\$0-2500	\$0	\$0
\$1541-1725	\$1676-1850	\$1901-2175	\$2151-2435	\$2501-2800	\$7	\$14
\$1726-1986	\$1851-2414	\$2176-2874	\$2436-3333	\$2801-3793	\$8	\$16
\$1987-2286	\$2415-2676	\$2875-3340	\$334-3800	\$3794-4000	\$12	\$24
\$2287-2573	\$2677-3076	\$3341-3760	\$3801-4363	\$4001-4500	\$15	\$30
\$2574-2860	\$3077-3477	\$3761-4180	\$4364-4851	\$4501-5444	\$18	\$36
\$2861-3132	\$3478-3869	\$4181-4606	\$4852-5342	\$5445-6079	\$21	\$42
\$3133-3410	\$3870-4210	\$4607-5012	\$5343-5812	\$6080-6615	\$25	\$50
\$3411-3685	\$4211-4551	\$5013-5418	\$5813-6285	\$6616-7153	\$28	\$56
\$3686-4200	\$4552-5252	\$5419-6253	\$6286-7253	\$7154-8254	\$35	\$70
\$4201-4820	\$5253-5952	\$6253-7086	\$7253-8221	\$8255-9354	\$42	\$84
\$4821 & up	\$5953 & up	\$7087 & up	\$8221 & up	\$9355 & up	\$60	\$120

Signature of Parent: _____

Today's Date: _____

The Northampton Public Schools are committed to insuring that no student is denied access to any educational program or other activity of the Northampton Public Schools for reason of face, color, national origin, religion, creed, age, handicap, gender, gender identification or sexual orientation.

Please contact the Early Childhood Center if you have any questions about our program or if you need assistance completing this form. (413) 587-1471 or efrank@northampton-k12.us