



Pre-Kindergarten (Preschool) Scholarship Application

Child's Name (Last Name)		(First Name)		(Middle Initial)	
Date of Birth / /		Age		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Street Address			Town		Parish
Cell phone ()		County			
Child lives with: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Foster <input type="checkbox"/> Other (Please specify)_____					
Who may we contact regarding application?					
Name:		Relationship:		Cell phone	
Mother/Guardian's Name			Father/Guardian's Name		
Address			Address		
Day Phone /Evening Phone ()			Day Phone/ Evening Phone ()		
Email Address:			Email Address:		
Preschool Enrollment Information					
Is the child currently enrolled in a preschool program? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Is the child currently receiving any subsidized child care/ preschool funding? <input type="checkbox"/> Yes <input type="checkbox"/> No Source? _____					
<i>Preschool Classes during the 2017-2018 School Year</i>					
Preschool Only					
Preschool Only schedule:					
Number of Days: 5 Days (M-F) From 8:30 A.M. to 2:00 P.M.					
Household Income Information: *Must provide					
Number of People in Household:_____ Number of Adults:_____ Number of Children: _____					
Deliver to: KinderCare Academy c/o Preschool Scholarship Program Addison Park Drive Brown's Town, St. Ann 876-917-6293				<i>Internal Use Only:</i> Date Received: ___/___/___	



Pre-Kindergarten (Preschool) Scholarship Program Guidelines

- 1) All application information must be fully completed and submitted on time by the applicant in order for the application to be considered. This includes the Interview process and home inspection visit, Application Form and proof of income.
- 2) Scholarship award will be awarded to one eligible family (applicant) per year.(One child)
- 3) Scholarship applicants must be residents of Brown's Town and its surrounding communities.
- 4) Parents must submit 2 references from a Pastor, Justice of the Peace
- 5) The child must be between 3 years and 4 years by September 1st.
- 6) The scholarship awarded to student is full tuition, uniforms and all supplies needed. Field Trips and extra- curricular activities/Afterschool are not included in scholarship.
- 7) Scholarship does not cover child care services (before or after preschool). Child must not arrive before 8:30 AM and must be picked up at 2:00 PM (Overtime charges will apply)
- 8) No person(s) shall receive any direct cash benefit from any scholarship award(s).
- 9) Acceptance of scholarship does not exempt the family or student from abiding by the policies and guidelines of KinderCare Academy.
- 10) This scholarship award will go through to Kindergarten.
- 11) The parent/guardian must notify KinderCare Academy immediately if they wish to withdraw.
- 12) Children need to attend at least 85% of their enrolled schedule per month. With the exceptions of illness, or other extenuating circumstances, missing more than 10 days per term or 20 days per school year will render you ineligible for scholarship. You will be dismissed from the program.
- 13) Transportation to and from KinderCare is the responsibility of the parents.
- 14) Scholarship award shall be made without regard to race, color, religious creed, *disability, ancestry, national origin, sex, or limited English proficiency, in accordance with applicable law.
- 15) All application information will be maintained by KinderCare Academy in the strictest of confidentiality and will not be used for purposes other than application for the scholarship and providing required reports.

***Must be teachable**

Signature of Parents(s) or Guardian(s): *(Please have ALL parents living within the household sign below)*

I/We certify that all information on this form, as well as all supporting documentation, is true, correct, and complete to the best of my/our knowledge and that all household income has been reported. I/We understand that deliberate misrepresentation of information may result in the scholarship being denied or revoked, and that any scholarship awarded based on false information may need to be reimbursed. I understand that I may be asked to provide additional income information. Furthermore, I/We have read and agree to abide by the guidelines stated above if awarded a scholarship.

_____	____/____/____	_____
Signature	Date	Printed Name
_____	____/____/____	_____
Signature	Date	Printed Name