



Date: \_\_\_\_\_

**Child Information:**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Female  Male

Primary Language: \_\_\_\_\_

Is your Child multi-lingual?  Yes  No If yes, please list languages: \_\_\_\_\_

Does your Child have an Individualized Education Plan (IEP) or an Individualized Family Service Plan (IFSP)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Does your Child receive services for any of the following (check all that apply):				
<input type="checkbox"/> speech	<input type="checkbox"/> language	<input type="checkbox"/> occupational therapy	<input type="checkbox"/> physical therapy	<input type="checkbox"/> developmental delay
<input type="checkbox"/> psychiatric disorders	<input type="checkbox"/> autism spectrum	<input type="checkbox"/> behavioral concerns	<input type="checkbox"/> other _____	

Other Child Eligibility Risk Factors (Please check all that apply):
<input type="checkbox"/> Child Protective Services: A child who is a foster child, a kinship care child or receiving Children and Youth services
<input type="checkbox"/> Education level of parent/guardian: does not have a high school diploma or GED or post-secondary degree
<input type="checkbox"/> Homeless: A child who lacks a fixed, regular, and adequate nighttime residence due to one of the following: 1.) Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, or camping grounds due to lack of alternative accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; 2.) Children who have a primary nighttime residence that is a public or private accommodation for human beings; 3.) Children who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
<input type="checkbox"/> Incarcerated Parent: A child for whom one of the child's parents is currently in prison
<input type="checkbox"/> Migrant (non-immigrant)/Seasonal Student: A migrant child has moved from one school district to another in order to accompany or to join a migrant parent or guardian, who is a migratory worker or migratory fisher, within the preceding 36 months, in order to obtain temporary or seasonal employment in qualifying agricultural or fishing work including agri-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
<input type="checkbox"/> Teen mother: A child whose mother was under the age of 18 when the child was born

**Parent/Guardian 1 Information:**

Date of Birth:  
\_\_\_\_\_

First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

School District of Residence: \_\_\_\_\_

Relationship to Child:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

Does the Child live with this Parent/Guardian:  Full-time  Part-time  Not at all

Native Language: \_\_\_\_\_

Is this Parent/Guardian multi-lingual?  Yes  No If yes, please list languages \_\_\_\_\_

**Parent/Guardian 2 Information:**

First: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Date of Birth:  
\_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

School District of Residence: \_\_\_\_\_

Relationship to Child:  Father  Mother  Grandparent  Guardian  Other: \_\_\_\_\_

Does the Child live with this Parent/Guardian:  Full-time  Part-time  Not at all

Native Language: \_\_\_\_\_

Is this Parent/Guardian multi-lingual?  Yes  No If yes, please list languages \_\_\_\_\_

**Family Information:**

Including your Child, how many people live within the household? \_\_\_\_\_

- Household Income:  Less than \$5,000  \$5,001 - \$10,000  \$10,001 - \$15,000  
 \$15,001 - \$20,000  \$20,001 - \$25,000  \$25,001 - \$30,000  
 \$30,001 - \$35,000  \$35,001 - \$40,000  \$40,001 - \$45,000  
 \$45,001 - \$50,000  \$50,001 - \$60,000  \$60,001 - \$70,000  
 \$70,001 - \$100,000  More than \$100,000  Unknown

*Prior to enrollment, annual family income must be verified and must be at or below 300% of poverty level (based on 2016 Federal Poverty Level Guidelines).*

Family size	300% of Poverty
1	\$ 35,640
2	\$ 48,060
3	\$ 60,480
4	\$ 72,900
5	\$ 85,320

*For families with more than 5 persons, add \$12,480 for each additional person.*

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Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only	Income: _____
Date received: _____	Income Verified by: _____