

434-522-3774 fax

Lynchburg City Schools Pre-Kindergarten Program and



Lyn-CAG Head Start Program 2017-2018 School Year

Child's Name:		Date:				
	Last First	t	Middle			
Child's Current Age:	Child's Date of Birth:					
Parent or Guardian's Name:	 Last	First		Middle		
	Last	11130		iviidale		
Address						
Street			Zip Code			
Telephone Numbers:						
Home		Work	Work Cell			
Is your child presently enrolled	l in Head Start? Yes No	Does y	our child have an IE	P? Yes_	No	
Please check the appropriate p	program - check only one:	*Do you wor	rk:			
Head Start 3 Year Old Program - I am interested in applying for the Head Start Program. My child will be 3 years old		1st SI	hift2nd Shift	3rc	I Shift	
during the 2017-2018 program year. I understand that eligibility is based on age and income.		* Number of	* Number of persons in your household			
		* Please che	ck the following cate	egory that	t applies to your	
	nm - I am interested in applying m. My child will be 4 years old	total family	_	0-7	7.1	
during the 2017-2018 program year. I understand that			\$0	to	\$12,060.00	
eligibility is based on age	and income.		\$12,060.01	to	\$16,240.00	
			\$16,240.01	to	\$20,420.00	
Lynchburg City Schools Pre-l		\$20,420.01	to	\$24,600.00		
am interested in ap		\$24,250.01	to	\$28,410.00		
Pre-Kindergarten Program. My child will be 4 years			\$28,780.01	to	\$32,960.00	
old on or before September 30, 2017. I understand that acceptance is based on the needs of the child			\$32,960.01	to	\$37,140.00	
as determined by the Lynchburg City Schools			\$41,320.01	or	above	
Pre-Kindergarten screenir	· ·					
Please complete this form and	•	What is your	r total family income	per year		
school, the Lyn-CAG Head Administration Building, or by I	Start Program, the LCS mail to:	How did you	ı learn about the pro	gram? (C	ircle all that apply)	
Pam Thomas	Kina Faglish	School	Radio To	elevision	Flyer	
Pam Thomas	Kim English		ernet Neighbor		lewspaper	
Pre-Kindergarten Program	Head Start Program				-10 - 10 - 0	
915 Court St.	400 Buena Vista St.	*You will he	contacted by mail o	nce vour	application is	
Lynchburg, Va 24505 434-515-5030 phone	Lynchburg, VA 24504 434-846-2967 phone	received.		, , , , , , ,	- F-E	

434-846-0424 fax

revised 2/17