

Mason City Community School District
4-Year-Old Preschool Program – 2012-2013 School Year

The information below is for PRE-REGISTRATION only; you will have to officially register once approved for the program. This official registration will occur in August 2012.

Child/Family Information

Child's Legal Name: Last _____ First _____

Date of Birth: _____ Gender: Male _____ Female _____
(Must be 4 years-of-age by September 15, 2012; child cannot be 5 years old.)

Race: African-American _____ American Indian _____
Asian _____ Hispanic _____ White _____

Parent/Guardian: _____

Parent/Guardian: _____

Address: _____

Mailing Address (if different from street address): _____

City: _____ State: _____ Zip: _____

Phone: Work: _____ Home: _____ Cell: _____

E-mail address (optional): _____

Primary Language spoken in the home: _____

Please share if your child has any special needs or health concerns. _____

Father/Guardian's Occupation: _____

Mother/Guardian's Occupation: _____

Please check next to the gross total income of both parents/guardians: (You may be asked to verify financial information.)	
_____ \$ 0.00 to 24,000	_____ \$72,001 to 84,000
_____ \$24,001 to 36,000	_____ \$84,001 to 96,000
_____ \$36,001 to 48,000	_____ \$96,001 to 108,000
_____ \$48,001 to 60,000	_____ \$108,001 to 120,000
_____ \$60,001 to 72,000	_____ \$120,001 and up
Total number of family members living in the home: _____	
Any financial considerations which need to be noted, such as medical bills, job layoffs, or any other hardship? _____	
(Please identify programs you are in or qualify for such as SSI, foster care, WIC, etc.)	
_____ I do NOT want to share any of the financial information. If you check this line, you will be a family that would be considered to have the "ability to pay." Not to pay for pre-school tuition, but perhaps transportation.	

Please respond to the following questions:

1. Which do you see as barriers to enrolling your child in preschool?
(Check all that apply) _____ transportation _____ cost _____ work schedule
2. If accepted into preschool, which skill(s) would you expect your child to demonstrate growth?
(Check all that apply) _____ social skills _____ academic skills
_____ self-help skills _____ other (please specify): _____
3. What play activities does your child prefer? (check all that apply)
_____ reading _____ play dough _____ puzzles/board games
_____ dressing dolls _____ color/cutting/gluing _____ building blocks/legos
4. Which session of preschool would you prefer? _____ a.m. _____ p.m.
(During the 2012-2013 school year, the a.m. section was scheduled from 8:45 to 11:15 and p.m. section was 12:15 to 2:45. Tuesday's schedule was approximately 30 minutes later.)
5. Will your child need bus transportation to preschool? ___Yes ___No
6. If your child will be bused from a child care provider, please indicate the name and address of your child care provider.

7. Have you enrolled your child in another preschool for the Fall of 2012? ___Yes ___No
8. What is the best way to contact you?
_____ E-mail _____ home phone _____ cell phone _____ work phone

Empowerment Board, a three-county area funding source for pre-school initiatives, has agreed to be an advocate to help the three counties, Cerro Gordo, Hancock, and Worth, get as many 4-year-old children into preschool as want to attend preschool. One way to do this is they have agreed to record all the 4-year-old children who register and enroll in a preschool. Your signature below would allow us to share your child's name with the Empowerment Board. Your child's information is confidential, and if shared with the Empowerment Board, they agree to keep it confidential by not selling or trading any information. For Mason City Community School District to share this information we need your active permission. Please check the box below and sign this document that all information is correct and accurate.

_____ Mason City Community School District can share my child's information with the Empowerment Board

_____ Mason City Community School District can NOT share my child's information with the Empowerment Board

Signature: _____

Date: _____