



DANVILLE PUBLIC PRESCHOOL PROGRAM

Please Choose the Program Year and Time

2022-2023 2023-2024 2024-2025 2025-2026

CLASSES ARE 1/2 DAY MONDAY – THURSDAY
_____ A.M. _____ P.M.

Child must be 3 years old by August 1st of the program year.

CHILD'S INFORMATION:

Child's Full Name		
(First)	(Middle)	(Last)
Home Phone:	School District of Residence:	Date of Birth:
Street:	City:	Zip:
Mailing Address (If Different)	City:	Zip:
County:	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Is your child currently on an Individualized Education Plan (IEP)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list school district's name and Phone number of available.
Are there custody papers regarding the above child? If yes, who is the residential parent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No *Copy of custody papers needed.
Who does the child live with:	<input type="checkbox"/> Mother and Father	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparents <input type="checkbox"/> Mother & Step Father <input type="checkbox"/> Father & Step Mother <input type="checkbox"/> Foster Family <input type="checkbox"/> Adoptive Family <input type="checkbox"/> Other

PARENT/GUARDIAN CONTACT INFORMATION:

1) Parent/Guardian's First Name:	Relationship to Child:
Home Phone:	Cell Phone: Work Phone:
2) Parent/Guardian's First Name	Relationship to Child:
Home Phone:	Cell Phone: Work Phone:
<input type="checkbox"/> You may contact us by this email address:	

MEDICAL INFORMATION

Does your child have any health/physical problems that we should be aware of?

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

OTHER INFORMATION

Comments and other information we may need:

****IMPORTANT FINANCIAL INFORMATION – PLEASE READ ****

Danville Public Preschool is partially funded by the Ohio Department of Education. Tuition is based on the Federal Poverty Guidelines and a sliding fee will be in place for people below the \$200% Poverty Level. To help place your child accordingly, please indicate your income level according to the Federal Poverty Guidelines attached to this application. The sliding scale and tuition range are state requirements.

INCOME LEVEL (PLEASE SEE ATTACHED CHART)

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------|
| <input type="checkbox"/> 0 – 100% | <input type="checkbox"/> 126 – 150% | <input type="checkbox"/> 176 – 185% | <input type="checkbox"/> 201%+ |
| <input type="checkbox"/> 101 – 125% | <input type="checkbox"/> 151 – 175% | <input type="checkbox"/> 186 – 200% | |

Number of people living in the same household? _____

****PLEASE NOTE: THE ATTACHED GUIDELINES ARE THE CURRENT FEDERAL GUIDELINES AND MAY NOT BE THE ACTUAL GUIDELINES FOR THE YEAR YOUR CHILD IS ENROLLED. THE SLIDING FEE WILL BE BASED ON THE GUIDELINES THAT ARE ISSUED FOR THE YEAR THE CHILD IS ENROLLED.****

PARENT SIGNATURE _____

DATE: _____

**Enrollment is determined on a first come, first served bases within each of the income levels served. Older children may receive priority over younger children in order to provide them a preschool experience before kindergarten. A percentage of students must be at or below the 200% poverty income level (state requirement). Priority is given to returning students. Admission is open to children without regard to religion, sex, race, creed, national origin, or disability.

Return this application to:

Email: Jennifer.briggs@danvilleschools.org or Fax: (740) 599-5904

Mail: Danville Local Schools, PO Box 30, Danville, OH 43014



Danville Public Preschool

205 Rambo Street, Danville, Ohio 43014 (740)-599-6116 (740) 599-5904

To Whom It May Concern:

Thank you for your interest in the Danville Public Preschool Program.

Attached please find the Application Form necessary to place your child on our waiting list. Please choose the program year (s) and time. Please fill out both sides of the application and return in one of three ways indicated:

Mail to:

Danville Local Schools
PO Box 30
Danville, OH 43014

Fax to: (740) 599-5904

Email to: cris.dorsey@danvilleschools.org

A copy of your child's birth certificate and current immunizations will be required once accepted into a classroom and before the start of school. We recommend obtaining birth certificates now due to processing time at the agencies. If you need help in obtaining a birth certificate, please contact our office.

PLEASE NOTE: YOUR CHILD/CHILDREN WILL NOT BE PUT ON ANY WAITING LIST UNTIL AN APPLICATION FORM IS RECEIVED IN OUR OFFICE. CLASSES ARE FILLED ON A FIRST COME, FIRST SERVED BASIS. OLDER CHILDREN MAY RECEIVE PRIORITY OVER YOUNGER CHILDREN IN ORDER TO PROVIDE THEM A PRESCHOOL EXPERIENCE BEFORE KINDERGARTEN.

If you have any questions regarding this application or our preschool, please feel free to contact our office at (740) 599-6116 Ext. 4303.

Thank you

Jenny Briggs
jennifer.briggs@danville schools.org
740-599-6116 x- (work)
740-263-9725 (cell)

Cris Dorsey
cris.dorsey@danville schools.org
740-599-6116 x-4303
614-791-1819 (cell)

Current Guidelines will be used when your child
is accepted into a preschool classroom.

**United States Department of Health and Human Services
2020 FEDERAL POVERTY GUIDELINES ***

*Annual Family Income

*See ODE 2020 Federal Poverty Guidelines for additional family members

Size of Family Unit	100% or Below Poverty Level		101-125% Poverty Level		126-150% Poverty Level		151-175% Poverty Level		176-185% Poverty Level		186-200% Poverty Level		201%+ Poverty Level
1	0	- 12,760	12,761	- 15,950	15,951	- 19,140	19,141	- 22,330	22,331	- 23,606	23,607	- 25,520	25,521
2	0	- 17,240	17,241	- 21,550	21,551	- 25,860	25,861	- 30,170	30,171	- 31,894	31,895	- 34,480	34,481
3	0	- 21,720	21,721	- 27,150	27,151	- 32,580	32,581	- 38,010	38,011	- 40,182	40,183	- 43,440	43,441
4	0	- 26,200	26,201	- 32,750	32,751	- 39,300	39,301	- 45,850	45,851	- 48,470	48,471	- 52,400	52,401
5	0	- 30,680	30,681	- 38,350	38,351	- 46,020	46,021	- 53,690	53,691	- 56,758	56,759	- 61,360	61,361
6	0	- 35,160	35,161	- 43,950	43,951	- 52,740	52,741	- 61,530	61,531	- 65,046	65,047	- 70,320	70,321
7	0	- 39,640	39,641	- 49,550	49,551	- 59,460	59,461	- 69,370	69,371	- 73,334	73,335	- 79,280	79,281
8	0	- 44,120	44,121	- 55,150	55,151	- 66,180	66,181	- 77,210	77,211	- 81,622	81,623	- 88,240	88,241
Income Level	100% or Below Poverty Level		101-125% Poverty Level		126-150% Poverty Level		151-175% Poverty Level		176-185% Poverty Level		186-200% Poverty Level		201%+ Poverty Level

Directions:

1. In the first column, Size of Family Unit, find the number of members in your household.
2. Follow that line across until you come to your household yearly income level.
3. Mark your income level on the back of the application.