

FAYETTE COUNTY PRE-K PROGRAM

SITE SELECTION FORM 2015-2016

Student Name: _____
Last
First
Middle

Physical Address: _____

Home School: _____
 (where your child will attend kindergarten based on school zones)

Indicate with an X your 1st, 2nd, and 3rd choices for a Pre-K site and answer the questions below. You **MUST** select three sites for your application to be processed.

Pre-K Site	1 st	2 nd	3 rd
Ansted Elementary			
Ansted Head Start			
A Place to Grow			
Boomer Head Start			
Divide Elementary			
Fayetteville Head Start			
Gauley Bridge Elementary			
Meadow Bridge Elementary			
Mount Hope Elementary			
Oak Hill Head Start			
Page Head Start			
Scarbro Head Start			
Starting Points			

- If necessary, will you be able to transport your child to preschool? ___ YES ___ NO
- Does your child require after care? ___ YES ___ NO
- Does your child need before care? ___ YES ___ NO
- Did your child attend Pre-K as a 3-year old? ___ YES ___ NO. If yes, where?

- Does your child have a sibling who attends your 1st choice site? ___ YES ___ NO

For Office Use Only:

Date application was received: _____

- ___ Universal Pre-K Application
- ___ Birth Certificate
- ___ Proof of Residence
- ___ Income Verification
- ___ Immunization Records
- ___ Health Check Form
- ___ Health History Form
- ___ Parent Interview Form

Additional Notes:

Site Assigned to: _____