



Baldwin-Whitehall School District

Pre-Kindergarten Application

THIS APPLICATION DOES NOT ENSURE ENROLLMENT.

- Must be a resident of Baldwin-Whitehall School District and age 4 before September 1, 2026.
- Students are eligible for this program based on their family's income, which must be below the 300% poverty level for the size of the family. If your income is above the federal poverty guidelines, your child is not eligible for the program. See Income Verification form attached.

****Please include a copy of your child's birth certificate, copies of 3 recent paystubs (if currently working), and current W-2s for anyone earning income in the household in order for your application to be processed.**

If more than 40 applications are received, students will be chosen through a guided selection process using the Pre-K counts criteria.

Student Information

Last Name (Child)		First Name (Child)		Middle Initial
Street Address			County	
City		State PA	Zip Code	
Child's Date of Birth			Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Race (optional)				
<input type="checkbox"/> Black or African American		<input type="checkbox"/> American Indian or Alaskan Native		
<input type="checkbox"/> Asian		<input type="checkbox"/> White		
<input type="checkbox"/> Native Hawaiian or Pacific Islander		<input type="checkbox"/> Other		
<input type="checkbox"/> Not Applicable				
Ethnicity (optional)			Primary Language (spoken by child)	
<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Not Applicable			<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Nepali <input type="checkbox"/> Other _____	
Select your preference for your child's pre-kindergarten class.				
<input type="checkbox"/> AM <input type="checkbox"/> PM				
Is your child currently enrolled in a preschool program? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, what program do they attend? _____				

Transportation will not be provided for the Pre-Kindergarten program.

Would you be able to provide transportation for your child?

- Yes No

Additional Student Information (Must check all that apply):

<input type="checkbox"/>	Behavioral Supports: Has the student received any Special Education support and/or services?
<input type="checkbox"/>	English Language Learner: A child whose first language is not English and who is in the process of learning English is considered an English Language Learner.
<input type="checkbox"/>	Individualized Education Plan (IEP): A child who is currently enrolled in the Preschool Early Intervention program with an active IEP. Verification would be a copy of the IEP or other source of documentation from the parent or Early Intervention provider.
<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.

Parent/Guardian 1 Information

Last Name		First Name	
Relationship to Child <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other		Lives with Student <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mobile Phone Number		Email Address	
Home Address (if different than the Student)			

Parent/Guardian 2 Information

Last Name		First Name	
Relationship to Child <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other		Lives with Student <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mobile Phone Number		Email Address	
Home Address (if different than the Student)			

To the best of my knowledge, the information provided in this application and the associated income documentation is accurate.

Parent/Guardian (Signature)



Date

Parent/Guardian Name (Print Name)

BALDWIN-WHITEHALL SCHOOL DISTRICT OFFICE USE ONLY

Date Received:

Time Received:

Staff Initials: