

Southern Fulton Pre-K Counts Program

Thanks to continuing state funding, the Pre-K Counts program in Southern Fulton School District is accepting applications for the 2021-2022 school year! SFSD has partnered with Fulton County Family Partnership to offer this valuable program to families in the Southern Fulton area.

Applications are currently being accepted for this program. Eligible families are encouraged to apply as soon as possible to avoid missing out on this educational opportunity!

SFSD residents who meet the required criteria will be considered for this program. **All families must meet the income guidelines in order to be considered for the program. Please look over the guidelines below before applying. If you are income eligible, continue to the application.**

Families who qualify financially and *also* have secondary at-risk factors (for example: English as a second language, Foster Care, Early Intervention Services, etc.) will be given priority consideration for the program.

To apply for the SF Pre-K Counts Program, complete the application on the last two pages. **To save yourself time and the hassle of filling out unnecessary paperwork, please only apply if you believe you meet the income guidelines that are listed below.** Only applicants that meet the income guidelines will be considered for the program. Please note that the guidelines are listed as **gross income**. Please see the following two pages for guidance regarding income.

Please submit completed applications to the Southern Fulton District Office.

Thank you for your interest in the PA Pre-K Counts Program at Southern Fulton!

If you have questions regarding the application process, please contact Amanda Flagle, SF Pre-K Counts Program Director and Family Engagement Advocate, at (717) 830-0094 or via email aflagle@fcfpinc.org.

300% of the Federal Poverty Level Guidelines

Family Size	Annual	Monthly	Weekly
1	\$ 38,640	\$3,220	\$743
2	\$52,260	\$4,355	\$1,005
3	\$65,880	\$5,490	\$1,267
4	\$79,500	\$6,625	\$1,529
5	\$93,120	\$7,760	\$1,791
6	\$106,740	\$8,895	\$2,053
7	\$120,360	\$10,030	\$2,315
8	\$133,980	\$11,165	\$2,577
Each Add'l	\$13,620	\$1,135	\$262

2021-22 SF Pre-K Counts Application

Date Form Completed: ___ / ___ / ___
MM DD YY

Last Name (Child)	First Name (Child)	Middle Initial
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Street Address		County	
City	State PA	Zip Code	
School District of Residence			
Home Phone	Work Phone	Email Address	

Child's Date of Birth	Age <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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Race (optional)	
<input type="checkbox"/> Black or African American	<input type="checkbox"/> American Indian or Alaskan
<input type="checkbox"/> Asian	<input type="checkbox"/> White
<input type="checkbox"/> Native Hawaiian or Pacific	<input type="checkbox"/> Other
<input type="checkbox"/> Not Applicable	
Ethnicity (optional)	Primary Language
<input type="checkbox"/> Hispanic	<input type="checkbox"/> English
<input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Spanish
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Other _____ (please specify)

Last Name (Legal Guardian)	First Name (Legal Guardian)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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Relationship to Child <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____ (please specify)	(Select) <input type="checkbox"/> Biological <input type="checkbox"/> Foster <input type="checkbox"/> Adoptive <input type="checkbox"/> Other _____ (please specify)
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Role

- Primary Guardian
 Secondary Guardian

- Legal Guardian
 Other _____

(please specify)

Household/Family Size (required) check box:

- 1 4 7
 2 5 8
 3 6 _____

Household Income (required) check box:

- Less Than \$5,000 \$5,001-\$10,000 \$10,001-\$15,000
 \$15,001-\$20,000 \$20,001-\$25,000 \$25,001-\$30,000
 \$30,001-\$35,000 \$35,001-\$40,000 \$40,001-\$45,000
 \$45,001-\$50,000 \$50,001-\$60,000 \$60,001-\$70,000
 \$70,001-\$100,000 More Than \$100,000

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For Office Use Only:**Actual Annual Verified Gross Household (Family) Income:**

\$ _____

*Attach copies of documents used to verify income prior to enrollment

- Family income is at or below 300% of federal poverty level (required risk factor). Consider all sources of income. See **Federal Poverty Level Guidelines** relative to family size (must be verified prior to enrollment).

