



Kindergarten 101
Summer 2021 Application and Emergency Information Form

Please return this application/emergency form to your home elementary school or email a copy to Deb Madden (dmadden@epsne.org) by April 23, 2021.

Kindergarten 101 will be held at Manchester Elementary and Fire Ridge Elementary.

Student Name: Student DOB:

Parent Name(s):

Assigned Elementary School:

Address: Zip Code:

Primary Phone 1: Primary Phone 2:

Email Address 1: Email Address 2:

Primary language spoken by the child Primary language the child speaks at home
English Other English Other

Primary language spoken by parent/guardian (if other than English)
Mother: Father:

In what language would you prefer to receive information from school? (if available)
English Spanish Other (please specify)

Do you anticipate that you will qualify for free or reduced-priced lunch? (See information on page 4)
Yes No (If left blank, applicant is presumed to not qualify for free or reduced-price lunch)

Has your child attended preschool? Yes No
If yes, where and for how many years?



- Please consider my child for enrollment in the Elkhorn Public Schools Kindergarten 101 program as a student eligible for free or reduced-priced lunch.
Please consider my child for enrollment in the Elkhorn Public Schools Kindergarten 101 program as an English Learner.
Please consider my child for enrollment in the Elkhorn Public Schools Kindergarten 101 program as a student with limited or no prior preschool experience.
Please consider my child for enrollment in the Elkhorn Public Schools Kindergarten 101 program as a peer model. I understand selection for this program is through a lottery process.



Special Needs Alert: Please list any medical, health, or other concerns that Kindergarten 101 personnel should know about your child.

Which hand does your child prefer to use? Right Left

Emergency Contacts: *(if parents are not available)*

Name: _____ Phone: _____

Name: _____ Phone: _____

Transportation:

Bus Transportation will be provided only for those students staying the entire time between 8:30 and 11:30. Please indicate below if your child will need transportation.

Do you want to request Bus Transportation?

Yes _____ If yes, child's weight: _____

No _____

***If you marked "yes", please read below:**

Transportation will be available for pick-up and drop-off at a limited number of sites. Locations will be finalized and communicated by June 11, 2021. To assist with planning, please check your preference from the following list of anticipated elementary school locations:

- Arbor View Blue Sage Hillrise Sagewood Skyline
- Spring Ridge West Bay West Dodge Station Westridge Woodbrook
- Other *(List site that you would request for consideration)*: _____





Permission:

As part of the Kindergarten 101 program, Elkhorn Public Schools and the Learning Community would like to gather information about your child's educational progress. This will be obtained through standardized educational assessments administered by trained personnel from Elkhorn Public Schools and/or the University of Nebraska Medical Center. The data collected is a result of the Learning Community requirements and will help determine the effectiveness of Learning Community initiatives in the Omaha community. Individual student information will remain private and will not be shared publicly.

_____ **has** my permission to participate in educational assessments during the
(Child's Name) Kindergarten 101 program.

_____ **does not have** my permission to participate in educational assessments
(Child's Name) during the Kindergarten 101 program.

Parent(s) signature _____

I certify that all information submitted in this application is true and accurate. I understand that my response regarding Free or Reduced-Price Lunch qualification is subject to verification by Elkhorn Public Schools. I acknowledge that a copy of my application (with approval status) will be provided to the University of Nebraska Medical Center working in conjunction with the Learning Community.

Parent(s) signature _____

Families will be notified of application approval or denial by May 20, 2021. Please note that this application does not enroll students for the free or reduced-price lunch program, or for English Learner services during the Kindergarten year. Separate forms and processes will be used for these programs.

To be completed by School Personnel	Date Received: _____
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Free or Reduce Lunch Price Information

This information is provided as a guideline for federal free or reduced-price lunch for the 2020-2021 school year. “Yearly Income” is the amount earned by all household members during a year before taxes and other deductions, and includes all income sources.

FEDERAL INCOME CHART FOR 2020-2021 SCHOOL YEAR					
Household Size	Yearly	Monthly	Twice per Month	Every Two Weeks	Weekly
1	23,606	1,968	984	908	454
2	31,894	2,658	1,329	1,227	614
3	40,182	3,349	1,675	1,546	773
4	48,470	4,040	2,020	1,865	933
5	56,758	4,730	2,365	2,183	1,092
6	65,046	5,421	2,711	2,502	1,251
7	73,334	6,112	3,056	2,821	1,411
8	81,622	6,802	3,401	3,140	1,570
Each Additional Person:	8,288	691	346	319	160

If a household’s annual gross income is less than the amount which corresponds to the number of persons in the household, applicant qualifies for free or reduced-price lunch. If a household’s annual gross income is more than the amount which corresponds to the number of persons in the household, applicant does not qualify for free or reduced-price lunch. For example, if there are five people in the household, and the household has Annual Gross Income of more than \$56,758, the applicant does not qualify for free or reduced-price lunch. **Please note that this information is used only for Kindergarten 101 enrollment and is not an application for free or reduced-price lunches for the 2021-2022 school year. Separate forms and processes will be used for these programs.**