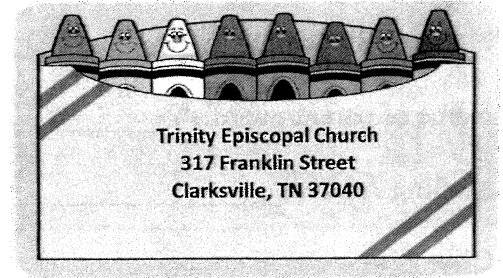


# IS YOUR CHILD READY FOR KINDERGARTEN?

- Can they count to 20?
- Do they follow instructions?
- Do they know all their letters?
- Can they recognize their name?
- Can they pay attention for more than 5 minutes?
- Do YOU know what really happens in Kindergarten?



If you answered “NO” to any of these questions, then this program is for you and your child!

## FREE KINDERGARTEN PREPARATION PROGRAM\*

**What:** Preparation for Kindergarten Program

**Where:** Trinity Episcopal Church, 317 Franklin Street, Clarksville TN 37040  
(2 blocks from downtown bus station)

**When:** **July 2 – July 20, Monday through Friday**  
9:00 am to 3:00 pm  
Orientation for parents and students: June 29<sup>th</sup>, 5:30 pm - 6:30 pm

**What is provided?** Instruction by a certified elementary teacher with emphasis on learning the letters of the alphabet and their sounds and the “how to’s” of kindergarten  
Breakfast and lunch  
Daily music class and supervised playground time  
Weekly local field trips  
Workshops for parents on ways to help your child with school

### \*Who is eligible?

Children who will be entering kindergarten in August 2018 (age 5 by August 15, 2018) and who qualify due to low income, foster care, or English language learner status.

### How do I apply?

Join us for juice and cookies at the Clarksville-Montgomery Library (350 Pageant Lane) on Saturday, **May 19 between 10:00 am and 2:00 pm**. Bring a copy of your child’s birth certificate and documentation of income eligibility (EBT/SNAP card, documentation of siblings in free/reduced lunch program, etc.)

OR

Mail or bring the completed application (on back of this page) and a copy of your child’s birth certificate to this address:  
Trinity Episcopal Church  
ATTN: Preparation for Kindergarten  
317 Franklin Street, Clarksville TN 37040

Applications are also available at [www.trinityparish.com](http://www.trinityparish.com) under “Outreach”

**\*\*\*Be 1 of the first 25 to apply and you will be entered in a raffle to win a backpack filled with school supplies for the upcoming school year. \*\*\***

**Questions?** Call or text (931) 206-4918

**Se habla español:** Contacte Senor Houston a (931) 906-8130

## 2018 Application – Trinity Preparation for Kindergarten Program

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Please check (✓) if Child/Family/Household member participates in one or more of the following programs, currently or during the past school year. Provide documentation with application.

|   |                  |  |            |  |                                       |  |                       |
|---|------------------|--|------------|--|---------------------------------------|--|-----------------------|
|   | Early Head Start |  | Head Start |  | Foster Care                           |  | Families First (TANF) |
|   | Migrant          |  | Homeless   |  | Federal Even Start<br>Family Literacy |  | Food Stamps / EBT     |
| Siblings met eligibility for Free or Reduced Price Meal Program for 2017-2018 |                  |  |            |  |                                       |  |                       |

Primary language spoken at home \_\_\_\_\_

Has student previously participated in a Pre-K school program? \_\_\_\_\_ Name of school \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

What time of day would be best for you to attend a workshop about ways to help your child succeed in school? Check one. **A parent/guardian of each student is required to participate in at least one workshop.**

\_\_\_\_\_ Morning while child is attending Prep for K      \_\_\_\_\_ Evening, after 6:00pm

\_\_\_\_\_ Afternoon while child is attending Prep for K

**I certify that the above information in this application is correct. I further understand that any falsification of information concerning income, birth certificate and/or completion of this application and other forms may be reason for disqualification of eligibility for Preparation for Kindergarten Program.**

Printed name of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent/guardian: \_\_\_\_\_

*This program is neither sponsored nor endorsed by the Clarksville-Montgomery County School System*

|   |                |
|---|----------------|
| <b>FOR OFFICE USE ONLY</b>                    |                |
| Date Application Received: _____              | by whom? _____ |
| Documentation of Income Eligibility: Yes / No | ESL: Yes / No  |
| Date registration packet sent: _____          | by whom? _____ |