

Grand Ronde Head Start Preschool

Teaching and supporting families in the Grand Ronde community

Enrollment Application

Thank you for your interest in enrolling your child in Grand Ronde Head Start Preschool. We would like to learn more about your family! Please fill in the following information. Once this application is completed a Head Start Preschool staff member will contact you to schedule an interview.

Child's name: Child's date		e of birth:		
Address:				
Telephone number:				
Parent/Guardian name(s):				
Is your child an enrolled member or d	lescendant of a federally recognized Indian tribe?	Yes	No	
Please specify tribe	Enrollment nu			
Are you interested in the Chinuk language immersion program for your child?			No	
Expectant mothers/Infants 0-2: Are you interested in home based program services?		Yes	No	
Are you interested in after care services (child care from 2pm to 5:15pm)		Yes	No	
	ande Head Start Preschool to share my name and c rces, Grand Ronde Health & Wellness Center, and eschool programs.	-		-
Parent/Guardian Signature	Date			
	Office use only			
Date Received	Time Received	Staff i	Staff initials	
A				



Please send completed applications to: amber.wright@grandronde.org



When you are contacted for your Head Start Preschool interview please be prepared to provide:

- 1. Proof of income: paystubs (or a letter from your employer stating your income), unemployment, TANF, SSI, child support, etc.
- 2. Proof of address: drivers license, piece of mail, etc.
- 3. Documentation of your child's tribal enrollment (if applicable)
- 4. Documentation of any diagnosed disability