

This child qualifies for pre-K based on: (For Pre-K Approving Office only)

LANGUAGE _____ INCOME _____ OTHER _____

Date _____ Verified by _____

NOTE: This application must be kept on file for five years.

Proof of income must be attached to application.

UNIVERSITY OF TEXAS ELEMENTARY SCHOOL

2017-2018 PRE-K APPLICATION

School _____

1 Print STUDENT INFORMATION

2 List CHILD'S SNAP or TANF Case No. (if applicable)

NAME	BIRTHDATE	SCHOOL	FOOD STAMP NUMBER OR	TANF NUMBER
		UTES		

3 FOSTER CHILD: YES--List the child's monthly personal use income. Write "0" if the child has no personal use income. \$ _____

4 HOUSEHOLD MEMBERS AND MONTHLY INCOME: If you gave a food stamp or TANF case number, make sure to list **all** members of household below.

NAMES OF ALL HOUSEHOLD MEMBERS	Gross MONTHLY Earnings for all household members (Before Deductions)		MONTHLY Welfare Payments Child Support, Alimony	MONTHLY Payments from Pensions, Retirement, Social Security	Any Other MONTHLY Income
	JOB 1	JOB 2			
1.	\$	\$	\$	\$	\$
2.	\$	\$	\$	\$	\$
3.	\$	\$	\$	\$	\$
4.	\$	\$	\$	\$	\$
5.	\$	\$	\$	\$	\$
6.	\$	\$	\$	\$	\$
7.	\$	\$	\$	\$	\$
8.	\$	\$	\$	\$	\$
9.	\$	\$	\$	\$	\$
10.	\$	\$	\$	\$	\$

5 SIGNATURE: I certify that all of the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of federal funds; that school officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal laws.

X _____
Signature of Adult Household Member

Printed Name _____ Home Telephone No. _____ Work Telephone No. _____

Street/Apt. No. _____ City/State/Zip _____ Date _____

