



## 2023-2024 PA Pre-K Counts Application

Application will be prioritized based on eligibility criteria. Once the program is full, applications will be waitlisted for ongoing enrollment if openings occur throughout the year.

### Administrative Offices

253 S Franklin Street  
Wilkes-Barre, PA 18701  
570-208-2252

Please check which center you would like to attend:

- ☐ Dallas ☐ Wilkes Barre ☐ Solomon ☐ Westside CTC  
☐ Mt Top ☐ Lake-Lehman ☐ West Hazleton ☐ Any BBLC Location

Date:	Last Name (Child)	First Name and Middle (Child)
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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"/> 1 <input type="checkbox"/> 2 <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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Name of Parent or Guardian completing this application	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
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<b>Parent/Guardian 1</b>
Name _____
Address _____
_____
Home Phone _____
Cell Phone _____
Email Address _____
Occupation _____
Employer _____
Address _____
Work Phone _____
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced

<b>Parent/Guardian 2</b>
Name _____
Address _____
_____
Home Phone _____
Cell Phone _____
Email Address _____
Occupation _____
Employer _____
Address _____
Work Phone _____
<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced

PreK Counts is a free academic program that is offered 8:45am - 3:15pm daily. If you need supplemental care, please list the times needed below. Supplemental care is an additional cost and not covered under PKC funding.

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">From</td> <td style="width: 50%; text-align: center;">To</td> </tr> <tr> <td colspan="2">Monday _____</td> </tr> <tr> <td colspan="2">Tuesday _____</td> </tr> <tr> <td colspan="2">Wednesday _____</td> </tr> <tr> <td colspan="2">Thursday _____</td> </tr> <tr> <td colspan="2">Friday _____</td> </tr> </table>	From	To	Monday _____		Tuesday _____		Wednesday _____		Thursday _____		Friday _____		<p>Any special arrangements needed for care:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <input type="checkbox"/> currently receiving subsidized childcare  <input type="checkbox"/> will pay privately for additional hours.  <input type="checkbox"/> need assistance on applying for subsidy/ELRC.         </div>
From	To												
Monday _____													
Tuesday _____													
Wednesday _____													
Thursday _____													
Friday _____													

<p><b>Employment Status of parent/guardian</b></p> <p> <input type="checkbox"/> Employed Full-Time  <input type="checkbox"/> Employed Part-Time  <input type="checkbox"/> Unemployed  <input type="checkbox"/> Other _____         </p>	<p><b>Employment Status of 2<sup>nd</sup> parent/guardian (if applicable)</b></p> <p> <input type="checkbox"/> Employed Full-Time  <input type="checkbox"/> Employed Part-Time  <input type="checkbox"/> Unemployed  <input type="checkbox"/> Other _____         </p>										
<p><b>Household Income Sources</b> (Must check all that apply):</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Employment</td> <td><input type="checkbox"/> Self-Employment</td> <td><input type="checkbox"/> Unemployment Compensation</td> <td><input type="checkbox"/> Worker's Compensation</td> <td><input type="checkbox"/> TANF Cash payments</td> </tr> <tr> <td><input type="checkbox"/> Social Security</td> <td><input type="checkbox"/> SSI</td> <td><input type="checkbox"/> Child Support</td> <td><input type="checkbox"/> Alimony</td> <td><input type="checkbox"/> Other</td> </tr> </table>		<input type="checkbox"/> Employment	<input type="checkbox"/> Self-Employment	<input type="checkbox"/> Unemployment Compensation	<input type="checkbox"/> Worker's Compensation	<input type="checkbox"/> TANF Cash payments	<input type="checkbox"/> Social Security	<input type="checkbox"/> SSI	<input type="checkbox"/> Child Support	<input type="checkbox"/> Alimony	<input type="checkbox"/> Other
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List Household Members below for determination of family size (required):		
	Relationship to Child	Age
1		
2		
3		
4		
5		
6		
7		

Per PKC Statute, Regulations, and Guidance, the following members of the household are included in family size:

- Parent of the child (biological or adoptive mother or father, stepmother or stepfather, caretaker, or spouse)
- A biological, adoptive, unrelated, or foster child or stepchild of the parent or caretaker who is under 18 years of age and not emancipated.
- A child who is 18 years of age or older but under 22 years of age who is enrolled in high school, a general educational development program, or a post-secondary program leading to a degree, diploma, or certificate and who is wholly or partially dependent on the income of the parent or caretaker or spouse of the parent or caretaker.
- Others supported by the income of the parent(s) or guardian(s) of the child enrolling or participating in the program. ***If counted toward family size, any applicable income of these persons must also be counted for eligibility purposes.***

**DETERMINED FAMILY SIZE =**

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**Other Child Eligibility Risk Factor Criterion** *(Must check all that apply):*

<input type="checkbox"/>	<b>ITCSP</b> – Child is currently enrolled in Infant Toddler Contracted slots program at Building Blocks Learning Center.
<input type="checkbox"/>	<b>Behavioral Supports:</b> A child who was referred to PA Pre-K Counts from an appropriately credentialed health or mental health practitioner who is not employed by the PA Pre-K Counts program; a child who is receiving mental health treatment. Additional verification beyond the interview is required.
<input type="checkbox"/>	<b>Child Protective Services:</b> A child who is a foster child, a kinship care child or receiving Children and Youth services.
<input type="checkbox"/>	<b>Education Level of Guardian:</b> Does not have high school diploma or GED or post-secondary degree.
<input type="checkbox"/>	<b>English Language Learner:</b> A child whose first language is not English and who is in the process of learning English is considered an English Language Learner.
<input type="checkbox"/>	<b>Individualized Education Plan (IEP):</b> A child who is currently enrolled in the Preschool Early Intervention program with an active IEP. Verification would be a copy of the IEP or other source of documentation from the parent or Early Intervention provider.
<input type="checkbox"/>	<b>Incarcerated Parent:</b> A child for whom one of the child's parents is currently in prison.
<input type="checkbox"/>	<b>Homeless:</b> A child who lacks a fixed, regular, and adequate nighttime residence due to one of the following: A. Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, or camping grounds due to lack of alternate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; B. Children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; C. Children who are living in cars, parks, public places, abandoned buildings, substandard housing, bus or train stations, or similar settings.
<input type="checkbox"/>	<b>Migrant (Non-Immigrant)/Seasonal Student:</b> A migrant child has moved from one school district to another in order to accompany or to join a migrant parent or guardian, who is a migratory worker or migratory fisher, within the preceding 36 months, in order to obtain temporary or seasonal employment in qualifying agricultural or fishing work including agri-related businesses such as meat or vegetable processing, working in nurseries such as Christmas and evergreen trees farming.
<input type="checkbox"/>	<b>Teen Mother:</b> A child whose mother was under the age of 18 when the child was born.

**Head Start Acknowledgement:** If your family falls within the 100% income limit you may also be eligible for the Federal Head Start. If so, information will be shared with you so your family is aware of your options, and you may choose to enroll in Head Start or enroll in PreK Counts.

Completed applications need proof of age and income documentation attached. (e.g., Birth certificate, W2 or one month's worth of paystubs) Information can be submitted to [pkc@buildingblockslearningcenter.com](mailto:pkc@buildingblockslearningcenter.com) or mailed to: Building Block Learning Center, 253 S Franklin Street, Wilkes-Barre, PA 18701 Attn: Admissions Department

To the best of my knowledge, the information provided in this application and the associated income documentation is accurate. I understand that I may be asked to verify or substantiate the information provided.

\_\_\_\_\_  
Parent/Guardian (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name (Print Name)



BBLC is an equal opportunity early childhood education organization.



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### FOR OFFICE USE ONLY

#### Income Verification

##### 2023 Federal Poverty Level Guidelines Based On Annual Income

Family Size	100% (Head Start Eligible)	300% (Pre-K Counts Eligible)
1	\$14,580	\$43,740
2	\$19,720	\$59,160
3	\$24,860	\$74,580
4	\$30,000	\$90,000
5	\$35,140	\$105,420
6	\$40,280	\$120,840
7	\$45,420	\$136,260
8	\$50,560	\$151,680
Each Additional	+\$5,140	+\$15,420 for each additional family member

**Actual Annual Verified Gross Household (Family) Income:** \$ \_\_\_\_\_

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

**Family Size (per PKC guidelines):** \_\_\_\_\_

- ☐ Family is over income and not eligible for PreK Counts.
- ☐ Family income is at or below 300% of federal poverty level relative to family size (required risk factor). Consider all sources of income. Must be verified prior to enrollment.
- ☐ Family income is at 100% of poverty level and Head Start income eligible.

\_\_\_\_\_  
**Staff Verifying Income, Family Size and Risk Factors Signature**

\_\_\_\_\_  
**Date**

**For Head Start Eligible families (100% of FPL or below)**

☐ **Check if not applicable**

Family has been informed of child's eligibility for Head Start and given the following:

- ☐ Application and/or assistance with referral
- ☐ Brochure or website with information about Head Start

\_\_\_\_\_  
**Staff Verifying Head Start Information Shared**

\_\_\_\_\_  
**Date**

**Date Entered into Pelican:** \_\_\_\_\_