

# HINDS COUNTY SCHOOL DISTRICT PRE-KINDERGARTEN APPLICATION

**STUDENT INFORMATION:**

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Weight: \_\_\_\_\_ lbs. Boy \_\_\_ Girl \_\_\_

Parent's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Home) (Work)

Home Address: \_\_\_\_\_  
(City) (State) (Zip Code)

Mailing Address: \_\_\_\_\_  
(City) (State) (Zip Code)

Please have the following items available at the time of screening:

- \_\_\_\_\_ Birth Certificate Long Form
- \_\_\_\_\_ Immunization Compliance Form 121
- \_\_\_\_\_ Social Security Card
- \_\_\_\_\_ Two Proofs of Residency  
(Refer to list on back of this form)

**SCREENING INFORMATION:**

<p><i>Initial Screening Assessment: (To be completed at the time of screening)</i></p> <p>Cognitive and Communications Skills Cut Score: _____</p> <p>Cut Score Points: 0 – 10 = 40 points    13 – 24 = 30 points 25 – 36 = 20 points    37 – 47 = 10 points    48 points = 0 points</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 40 points)</i></p>
<p><i>Student Lives With:</i></p> <p>_____ One Parent/Legal Guardian* (5 points)</p> <p>_____ Both Parents/Legal Guardians* (3 points)</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 5 points)</i></p>
<p><i>Parent's/Legal Guardian's* Education:</i></p> <p>_____ Did Not Complete High School (10 Points)    _____ GED (8 points)</p> <p>_____ High School Diploma (5 points)    _____ College Degree &amp; above (2 points)</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 10 points)</i></p>
<p><i>Age of Parent/Legal Guardians*:</i></p> <p>_____ Under 18 (10 points)    _____ 18 – 20 years (8 Points)</p> <p>_____ 21 years &amp; above (2 points)</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 10 points)</i></p>
<p><i>Public Assistance:</i></p> <p>_____ YES (10 points)    _____ NO</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 10 points)</i></p>
<p><i>Other:</i></p> <p>_____ Migrant Student (5 points)    _____ English Language Learner (5 points)</p> <p>_____ Homeless Student (5 points)    _____ Previously enrolled in Head (5 points) Start</p> <p>_____ Special Needs Student (5 points)</p>	<p><b>TOTAL POINTS:</b> _____</p> <p><i>(Maximum of 25 points)</i></p>
<p><b>TOTAL</b></p>	<p><b>Total Score:</b> _____</p>

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## ACCEPTABLE PROOFS OF RESIDENCY

Upon enrollment, any parent seeking to enroll a student must verify full-time residency by submitting two proofs of residency:

- A Filed Homestead Exemption for the current year, or
- Mortgage payment documentation, or
- A Property deed of trust for the family's residence, or
- An apartment/home lease, **AND**
- A current utility bill

If the parent is unable to provide the items listed above, the parent must provide **TWO** pieces of business or government correspondence (dated within the last 30 days). HCSD does not accept affidavits, drivers' licenses/Mississippi state identification cards, or voter registration cards as proof of residency.

### ***\* LEGAL GUARDIAN***

The legal guardian shall provide the school a copy of valid court documentation regarding guardianship and restricted rights of certain individuals.