



VIRGINIA PRESCHOOL INITIATIVE (VPI) APPLICATION

For Office Use Only
Date Received: _____
Received by: _____

- PK/VPI Program provides school readiness to eligible children with the greatest need
- There are limited available seats based on a set of criteria & funding availability
- Applying does not guarantee acceptance as this program is based on need not 1st come, 1st serve
- Students who are not initially accepted are placed on a waiting lists in case a spot opens during the school year
- All children must be toilet trained without the use of pull ups and **must be age 4 by September 30**

Child's Name _____
Last
First
Middle

Date of Birth ____/____/____ Gender ____ Nickname _____

Parent/Guardian Name(s) _____

Day Phone _____ Evening/Cell phone _____ Email _____

Home Address _____
Street
City
Zip

Income Verification: This application must include a copy of the required income form for verification (last year's income return, W-2, 2 Paystubs or any other source showing income). Please attach a copy to this application.

1. How many people are in your household? _____
2. What is your annual gross income for **2019**? _____

***The following information is required from Virginia's Department of Education as part of the VPI grant.
Please know that your answers will be kept confidential.***

	Yes	No		Yes	No
3. Is your family currently homeless?			8. Is the child in foster care?		
4. Are you a single parent/family home?			9. Did the child's parents finish high school?		
5. Are either of the child's parents currently on military deployment?			10. Does the child speak a language other than English?		
6. Is the child being raised by someone other than his/her parents?			11. Are either of the child's parents currently incarcerated?		
7. Has the child been exposed to physical abuse and neglect, family abuse, substance abuse in the home?					

I _____ (**PRINT NAME**) verify that this information is correct. If the information provided is found to be incorrect through verification, I understand that my child's application will be invalid.

Signature: _____ Date: _____ Revised February 2020