

**2021-2022 Roseville Area Schools
Pre-K Financial Assistance Application**



Child Name: _____ Date of Birth _____
Parent/Guardian Name(s): _____
Address: _____
Phone Number: _____ Email: _____

The information requested on this form helps us understand more about how to support your family's needs and to determine if your family is eligible for fee assistance.

Who are the primary caregivers? (select all that apply)

Mother Father Grandparent(s) Foster Parent Other: _____

How many people are in your household?

Adults _____ Children _____

What is the highest level of education you (primary caregivers) have completed?

8th grade 12th grade High School diploma GED Some College (no degree)
 Associate's degree Bachelor's Degree or higher

Do you participate in any of these programs? (Mark all that apply)

<input type="checkbox"/> Child Care Assistance (CCAP)	<input type="checkbox"/> WIC
<input type="checkbox"/> Free or Reduced Price Lunch (FRPL)	<input type="checkbox"/> Medical Assistance (MA)
<input type="checkbox"/> Food Support (SNAP)	<input type="checkbox"/> Child receives ECSE services (IEP)
<input type="checkbox"/> Child and Adult Care Food Program (CACFP)	<input type="checkbox"/> Head Start
<input type="checkbox"/> MN Family Investment Program (MFIP)	<input type="checkbox"/> Foster care

Other family factors:

<input type="checkbox"/> English language learner (ELL)	<input type="checkbox"/> Income loss due to COVID-19
<input type="checkbox"/> Homeless (shelter, moving from place to place, doubling up temporarily with family or friends, car, hotel, etc.)	<input type="checkbox"/> Other (please explain): _____
<input type="checkbox"/> Severe/chronic health concerns	_____

What is your yearly household income? (before taxes): \$_____ or

\$ _____ weekly or \$ _____ every 2 weeks or \$ _____ monthly

Are you currently receiving, or have you ever received, a Pathways 1 or 2 scholarship? Yes No

Has your child been in Pre-K before? Yes No If yes, where? _____

I verify all of this information is true to the best of my knowledge.

Signed: _____ Date: _____

This information does not guarantee a discount can be offered. Sliding fee discounts may be available based on income and other factors. You may be asked to provide recent proof of income before any scholarship is finalized. If you have any questions, please call 651-604-3578.