

Avondale School District GSRP Application Packet

Avondale Student Services

2940 Waukegan, Auburn Hills MI 48326

248-537-6004



Please follow the steps below:

- Step 1: Review the 2019-2020 Acceptance & Prioritization Process & Basic Income Guidelines (attached)**
- Step 2: Complete the GSRP application and Student enrollment form.**
- Step 3: Attach ALL additional required documents listed below.**
- Step 4: Submit the completed application packet to the Student Services Office.**

Please note that eligibility cannot be determined until ALL documents have been received.

Required: Family income documented over 12 months (please submit all that apply)

- a. First page of your 2018 Michigan or Federal tax return that indicates your gross income.
- b. 2018 wage income *if it is different* from 2018; for example, if you had a job change in the past year. Submit a current pay stub that indicates your annual pay rate and how often you are paid.
- c. Unemployment Statement
- d. Child support/alimony/pension statement
- e. Income eligibility documentation acknowledgement.

Required: Proof of child's age (submit ONE of the following)

- a. Birth certificate (original with raised seal or special ink) , ***copies cannot be accepted***
- b. Child's passport

Required: Proof of residency in Oakland County (submit the following)

(Priority ranking will be given to families residing within the Avondale School District residency area.)

- a. Driver's license with current address
- b. 1 Utility bill
- c. Property Tax Bill or Closing Papers (if you own your home) **OR**
Lease Agreement with child listed (if you rent)
- d. Affidavit of Residency (for special situations)

Required: Additional Documents

- a. Child's immunization record
- b. Avondale Enrollment form
- c. GSRP Application form

More Questions?

Contact: Kristen Richey
248-537-6024

Kristen.richey@avondale.k12.mi.us

OR Tiffany Mellado
248-537-5049

Tiffany.mellado@avondale.k12.mi.us

Basic Income Guidelines for Great Start Readiness Program and Head Start

While this does not guarantee placement for your child, the following information may help you understand the different opportunities for your child. Head Start and Great Start Readiness Program (GSRP) use the Federal Poverty Level (FPL) for their income eligibility guidelines.

The Federal Poverty Guidelines for the 2019-2020 have been released and are listed below.

Annual Income	100%	125%	130%	138%	150%	185%	200%	235%	250%	300%
Family Size: 1	12,490	15,613	16,237	17,236	18,735	23,107	24,980	29,351	31,225	37,470
2	16,910	21,138	21,983	23,336	25,365	31,284	33,820	39,738	42,275	50,730
3	21,330	26,663	27,729	29,435	31,995	39,461	42,660	50,125	53,325	63,990
4	25,750	32,188	33,475	35,535	38,625	47,638	51,500	60,512	64,375	77,250
5	30,170	37,713	39,221	41,635	45,255	55,815	60,340	70,899	75,425	90,510
6	34,590	43,238	44,967	47,734	51,885	63,992	69,180	81,286	86,475	103,770
7	39,010	48,763	50,713	53,834	58,515	72,169	78,020	91,673	97,525	117,030
8	43,430	54,288	56,459	59,933	65,145	80,346	86,860	102,060	108,575	130,290
Each add'l person, add:	4,420	5,525	5,746	6,099	6,630	8,177	8,840	10,387	11,050	13,260

Head Start

- Federally-funded pre-kindergarten for 3- and 4- year olds.
- For Families at or below 100% of poverty.
- Classrooms located in public schools and other community sites in Oakland County.

Avondale does not have the Head Start Program in our district but you can get more information by visiting the Head Start website at <http://www.olhsa.org/head-start>

Great Start Readiness Program (GSRP)

- State-funded pre-kindergarten for 4-year olds.
- For families at 101% to 250% of poverty, plus other non-income factors that may prioritize placement.
- Classrooms located in public schools and childcare centers.

More information on GSRP can be found by visiting our district website at <http://www.avondaleschools.org/early-childhood/readiness-program>



STUDENT ENROLLMENT FORM

2940 WAUKEGAN STREET, AUBURN HILLS, MI 48326 *248-537-6039* FAX: 248-537-6074

Enrollment Date: **CHILD INFORMATION**

Child's Legal Name <small>(as shown on birth certificate)</small>		Date of Birth	
		Place of Birth	City State Country
Address			
City, State, Zip		My Child has previously enrolled in Avondale <input type="checkbox"/> Yes <input type="checkbox"/> No	
Home Phone		If Yes, why have you chosen to move back:	
Last School Attended	<i>Name / Address / City / State / Zip</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity: Hispanic/Latino <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your child require medication during school hours? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, physician signed orders must be presented to school principal</i>		Multiple Birth Status <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Triplet <input type="checkbox"/> Other _____	Race <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian American <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Black / African American <input type="checkbox"/> White
Is your child's native tongue English? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Primary Language at home <input type="checkbox"/> English <input type="checkbox"/> Other _____			
Services Child has received	<input type="checkbox"/> None <input type="checkbox"/> 504 Plan <input type="checkbox"/> IEP/Spec Ed <input type="checkbox"/> ESL/ELL <input type="checkbox"/> Title I/At Risk Support <input type="checkbox"/> Speech/Language service		
If applicable, what date did the child enter the US?			

PARENT / GUARDIAN INFORMATION

Child lives with: Father Mother Both Parents Joint Custody Legal Guardian Grandparents Foster Care Other

Parent / Guardian 1	Parent / Guardian 2
Name _____	_____
Legal Relationship _____	_____
Cell Phone _____	_____
Employer _____	_____
Work Phone _____	_____
Email Address _____	_____
Address if not Student's _____	_____
There are legal restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Court documents provided? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

HOUSEHOLD INFORMATION

Other Children in family living at residence

Name	Date of Birth	Grade

Parent / Legal Guardian Signature _____	Date _____
FOR OFFICE USE ONLY: Grade _____ <input type="checkbox"/> Auburn <input type="checkbox"/> Deerfield <input type="checkbox"/> Graham <input type="checkbox"/> Woodland <input type="checkbox"/> AMS <input type="checkbox"/> AHS School of residence (in-district transfer)? _____	
<input type="checkbox"/> Birth Cert <input type="checkbox"/> Immunization <input type="checkbox"/> Health/Vision (K) <input type="checkbox"/> Last Report Card/Transcript <input type="checkbox"/> Form of ID: DL - GI - Passport <input type="checkbox"/> Current Property Tax Or Lease <input type="checkbox"/> Current Utility Bill	
<input type="checkbox"/> Records Request <input type="checkbox"/> Affirmation of Discipline <input type="checkbox"/> Affidavit Form and Docs (if needed)	
UIC# _____	STUDENT # _____ SIGNATURE _____ DATE _____

GSRP APPLICATION

Child's Legal Last Name:	Child's First Name:	Program Preference: <input type="checkbox"/> Full Day <input type="checkbox"/> Half Day <input type="checkbox"/> No Preference
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Section 1: Family Information

Parent or Legal Guardian Information	Parent or Legal Guardian Information
Relationship: Choose an item.	Relationship: Choose an item.
Education (check highest level) ⑤	Education (check highest level) ⑤
<input type="checkbox"/> No High School Diploma <input type="checkbox"/> High School Diploma or GED <input type="checkbox"/> Some College/No degree <input type="checkbox"/> Bachelor's/Master's/Doctoral Degree	<input type="checkbox"/> No High School Diploma <input type="checkbox"/> High School Diploma or GED <input type="checkbox"/> Some College/No degree <input type="checkbox"/> Bachelor's/Master's/Doctoral Degree
Employment or Other (Check all that apply)	Employment or Other (Check all that apply)
<input type="checkbox"/> Employed Part time (less than 35 hours per week) <input type="checkbox"/> Employed full time (more than 35 hours per week) <input type="checkbox"/> Unemployed	<input type="checkbox"/> Employed Part time (less than 35 hours per week) <input type="checkbox"/> Employed full time (more than 35 hours per week) <input type="checkbox"/> Unemployed

Section 2: Family's Current Living Situation

Is the family currently living:	<input type="checkbox"/> In a home you own <input type="checkbox"/> In a home owned or rented by someone else <input type="checkbox"/> In a home you rent <input type="checkbox"/> In a temporary housing situation
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Section 3: Income of Family Members Legally Responsible for Child's Support

Name:	Total Annual Income:	\$
Name:	Total Annual Income:	\$

Please Select ALL Sources of Family Income Received in the last 12 Months

<input type="checkbox"/> Full or part time employment	<input type="checkbox"/> Unemployment Compensation	<input type="checkbox"/> Child Care Reimbursement
<input type="checkbox"/> Food Stamps	<input type="checkbox"/> Child Support	<input type="checkbox"/> Social Security
<input type="checkbox"/> Cash Assistance (FIP)		

Section 4: Supplemental Questions

Emergency Contact Name:	Phone # (w/area code):
Transportation required? (District residents only) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Section 5: Other confidential Information That May Prioritize Placement

3	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has the child ever been expelled from preschool or child care center?
3	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does child's behavior ever prevent participation in other group settings?
4	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does anyone in the household speak a primary language other than English?
6	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has someone in the household been abused or neglected?
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does child live with 1 adult as result of divorce, separation, incarceration, military service or death?
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does any sibling have a chronic illness, behavior issue, disability, or has a sibling died?
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was either parent under 20 years old when first child was born?
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is family without stable housing or is the family homeless?
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does family live in high risk neighborhood? (Unsafe due to crime, drug abuse etc.)
7	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was child exposed to toxic substances before or after birth? (Alcohol, drugs, etc.)
	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the child in foster care?

Section 6: Information on this Application is confidential.

Avondale GSRP will not discriminate against any family or student on the basis of race, color, national origin, gender or handicap.

I certify that the information, including income, provided in this application is accurate and truthful to the best of my knowledge. I understand that it is my responsibility to inform the district if I move, or if I have any other changes in circumstances that could affect my child's enrollment or placement.

Signature of Parent/Guardian: _____ Date: _____

2019-2020 Avondale School District GSRP Acceptance and Prioritization Process

The Great Start Readiness Program is a pre-school program for students who may be at increased risk for school difficulties. There is a process that assesses risks and places students in a priority ranking.

This is not a first come first served process, however there are timelines when lower rankings will be accepted if all applications for the most at risk have been placed. If you believe that your child may qualify, you are encouraged to apply for this program as early as possible.

Applications will be available **after Tuesday, May 1st, 2019**. You can obtain them:

- In person: Avondale Student Services office 2940 Waukegan, Auburn Hills, 48326.
- Online: <http://www.avondaleschools.org/early-childhood/readiness-program>
- Email or US Postal System: email request (including your address) to cathy.perez@avondale.k12.mi.us

Following is the Prioritization Process that Avondale follows:

1. Avondale Families with lowest incomes are placed first. Students with family incomes at 100% FPL or lower who qualify are referred to Head Start. If they prefer the Great Start Readiness Program, the parent/guardian must sign a Head Start Waiver, which Avondale will provide.
 - a. Students with incomes at or below 100% FPL may be placed as early as July 10, 2019.
 - b. Students with incomes between 101%- 200% may be placed by Mid-August if slots remain.
2. Students within the Avondale School District attendance area and are 4 years old by September 1, 2019 shall have preference through September 6, 2019.
3. Avondale students with incomes over 250% FPL may be considered after Monday, September 9, 2019, if availability remains. Tuition rates may apply.
4. Students with school of choice siblings who qualify (under 250% FPL) will be considered beginning September 9, 2019. The student must be 4 years old by September 1, 2019 and the family must reside in Oakland County.
5. Students from neighboring districts in Oakland County may be considered for enrollment beginning Monday, September 9, 2019. The student must be 4 years old by September 1, 2019

Avondale Students with an IEP recommending inclusive placement, who are 4 years old by September 1, 2019 may be considered for placement in GSRP in consultation with the child's caseload teacher and the Director of Special Ed.

Foster care and Homeless students and students with more risk factors will be placed first. Low income is not a necessary consideration or a requirement for these students.