Preschool Enrollment Criteria

The following criterion outlines how Southwest Public Schools will serve preschool students. The listing starts with students who would be the highest priority. In the event of a tie at any level, the earliest birthdate will be given priority. **Enrollment in the previous year at Southwest Public Schools Preschool does not guarantee acceptance for the following year.**

5-Year-Old Preschool (Pre-Kindergarten): Resident of the District

- **Children who are 5 years of age at the start of the enrollment year**, as long as they do not turn 6 years old before January 1 of that year

4-Year-Old Preschool- (Pre-Kindergarten): Resident of the District

4 years old, **resident** of the district
- ELL- English Language Learner
- Free or Reduced lunch status
- IFSP/IEP- Individualized Family Service Plan/ Individualized Educational Plan

4 years old, **resident** of the district
- No services required

3-Year-Old Preschool- (Preschool): Resident of the District

3 years old, **resident** of the district
- ELL- English Language Learner
- Free or Reduced Lunch Status
- IFSP/IEP- Individualized Family Service/ Individualized Educational Plan

3 years old, **resident** of the district
- No services required

4-Year-Old Preschool- (Pre-Kindergarten): Non-Resident of the District

4 years old, nonresident of the district
- No services required

Nonresidents of the District

The Southwest Public School Board of Education adopts the following standards for acceptance or rejection of option enrollment applications for preschool:

The school district shall not accept an option student when acceptance of the student:

(a) Would increase the operating costs of the school district, such as by requiring the hiring of new staff or contracting with outside entities to provide services to the student:
(b) Would require the procurement of new equipment, technology, or furnishings;
(c) Would cause or require the rearrangement of caseloads for staff and contracted professionals;
(d) Is reasonably deemed by appropriate school staff to pose a potential risk to the health or safety of students or staff;
(e) May pose a risk of adversely affecting the quality of educational services being provided to resident students, as determined by appropriate school staff.

Age is determined as of July 31of the calendar year in which the school year for which the child is seeking admission begins.

APPLICATION DEADLINE: **DECEMBER 17**

If the maximum number (20) is not reached, then a second consideration date is **April 1.**
Approved by the SWPS Board of Education on October 11th, 2021.

Southwest Public Schools

Preschool Application
School Year 2027-2028

OFFICE USE ONLY:
Date Received _____
Received by _____

Date: _____

Assurance of Confidentiality. The information on this form is being requested on a voluntary basis. The information you provide will help us to deliver or direct services most appropriate for your family's needs. Some of the information may be used to help plan national program initiatives. If you prefer not to provide some of the information, it will not affect the services we try to deliver. However, some information is required for eligibility determination. All information will be held in strict confidence.

Enrollment in the previous year at Southwest Public Schools Preschool does not guarantee acceptance for the following year. Please see the enclosed Preschool criteria.

Section 1: *Applicant (child)*

Last: _____ First: _____ Middle: _____

Name your child goes by if other than the legal name above: _____

Gender: ☐ Male ☐ Female Date of Birth: _____

Age as of January 1st 2027: _____

Race/Ethnicity: ☐ White ☐ Black ☐ Native American ☐ Hispanic ☐ Asian ☐ Other

Was he/she born prematurely? ☐ Yes ☐ No If yes, how many weeks? _____

Does your child currently have one of the following:
☐ IFSP (Individual Family Service Plan) ☐ IEP (Individual Education Plan)

Section 2
Primary Supporting Adult #1: _____

Last Name: _____ First Name: _____

☐ biological parent ☐ adoptive parent ☐ step-parent ☐ foster parent ☐ grandparent
☐ legal guardian ☐ other

Current Residence: _____ _____ _____
Street City State/Zip

Mailing Address: _____ _____ _____
Street City State/Zip

Contact Information:

Cell Ph: _____ Home Ph: _____ Work Ph: _____

Is this person employed or in school? ___Employed full-time ___Employed part-time ___Unemployed ___Full-time Student ___Part-time Student

Highest level of education completed:
___Grade 11 or less ___GED ___High School Diploma ___Vocational Certification ___Associates Degree ___BA/BS ___MA/MS ___PHD

Primary Supporting Adult #2: _____

Last Name:_____ First Name:_____

☐ biological parent ☐ adoptive parent ☐ step-parent ☐ foster parent ☐ grandparent ☐ legal guardian ☐ other

Current Residence: _____ _____ _____
Street City State/Zip

Mailing Address: _____ _____ _____
Street City State/Zip

Contact Information:
Cell Ph: _____ Home Ph: _____ Work Ph: _____

Is this person employed or in school? ___Employed full-time ___Employed part-time ___Unemployed ___Full-time Student ___Part-time Student

Highest level of education completed:
___Grade 11 or less ___GED ___High School Diploma ___Vocational Certification ___Associates Degree ___BA/BS ___MA/MS ___PHD

What language is spoken at home? Primary: _____Secondary:_____

Section 3
Family Composition

Family type: ☐ One Parent ☐ Two Parent ☐ Foster ☐ Non-Parent

Is this child a member of a dual-custody family? ☐ No ☐ Yes, the child lives in the physical custody of more than one parent/guardian during the enrollment year

The number of adults in the family: _____

The number of children: _____

Total number in the family: _____

Section 4
Additional Children in the Family

Name: _____ Date of Birth: _____ Age:_____

Name: _____ Date of Birth: _____ Age:_____

Name: _____ Date of Birth: _____ Age:_____

Name: _____ Date of Birth: _____ Age:_____

Name: _____ Date of Birth: _____ Age:_____

Section 5: Preschool Schedule Information
Our preschoolers attend **morning preschool classes from 8:00 a.m. to 12:00 p.m.** All Pre-K students eat lunch from **11:30 a.m. to 12:00 p.m.**

Families may choose to have their child stay for the **afternoon extended day preschool**, which runs from **12:00 p.m. to 3:40 p.m.** Attendance in the extended day session is **optional** — students may be picked up at **12:00 p.m.** if you prefer.

We will finalize the extended day option once preschool class assignments and enrollment numbers are confirmed. Completing **this section does not guarantee acceptance** into the extended day program. We are collecting this information to estimate interest and plan for potential enrollment.

To help us with planning, please indicate your preference below.
☐ **Yes**, my child **will attend** the afternoon extended day preschool.
☐ **No**, my child **will not attend** the afternoon extended day preschool.

Parent/Guardian Signature: _____

Include email address where we can send acceptance information:
email address:_____

APPLICATION DEADLINE: **DECEMBER 17th, 2026**
If the maximum number is not reached, a second consideration date is **April 1, 2027**

