



# Satsuma City School System

## 2019-2020 Application for Pre-K Admission

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220 Baker Road  
Satsuma, AL 36572

satsumaschools.com

Please complete the following application, and be sure to have the **REQUIRED DOCUMENTS** before you turn in your application. All applications must be postmarked by February 15, 2019 to be considered for the Satsuma City Schools Pre-K program.

### 1. Satsuma City Schools Pre-K Application

- Students must be 4 on or before September 2, 2019.
- Parents **MUST** supply an email address.
- Income must be disclosed for tuition purposes.

To complete the Satsuma City Schools Pre-K application, the following **REQUIRED DOCUMENTS** must be presented in person by a parent or legal guardian at the Satsuma City Schools Central Office.

### 2. Parent/Legal Guardian Photo ID

– Photo ID may include a driver’s license, a state identification card, a passport, or other official photo identification, such as an ID card obtained through an official government agency or consulate.

### 3. Proofs of Residence

The parent/guardian who owns/rents the property shall provide valid documents as proofs of residence. The proofs of residence that must be provided are a two utility bills and one of the following items: current mortgage statement, tax assessment letter, or signed notarized lease. The proofs of residence must be for the address being verified and utility bills/mortgage statements must not be past 30 days old.

\*\*For parents/guardians living with another person or family, a residency affidavit will have to be completed at the Satsuma City Schools Central Office. The owner of the property will have to provide the valid documents as proofs of residence (from list above). The parent/guardian must also provide an official document addressed to them at that address. Both parties must meet with the Pre-K Director AND School Resource Officer to present the proofs of residence and complete the residency affidavit.

\*\*\* After residency is verified, parents will be emailed the link to complete the registration process.

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### 4. Proof of Legal Custody

–If legal custody of a child is split between two parents, a certified copy of the most recent court order identifying each parent’s respective award of physical custody is required. The parent is responsible to immediately inform the school of any changes to the court order.

If you have additional questions about the Pre- K application process, you may contact the Satsuma City Schools Central Office at 251-380-8200.

**Satsuma City School System  
2019-2020 Pre-K Application  
Must be completed by Parent/Legal Guardian**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_ Race \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone(s) \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Student Lives with: \_\_\_\_\_ If guardian, what relation: \_\_\_\_\_

Social Security Number (voluntary) \_\_\_\_\_

**Parent/Guardian Name: \*\*If guardian, provide school with a copy of guardian papers.\*\***

Parent/Guardian 1: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Contact Numbers: \_\_\_\_\_

Employer: \_\_\_\_\_

Parent/Guardian 1 is:  Custodian  Authorized to pick up student  Responsible for bill

Family member (only select if resides in the same household as student)  Receives mailings

**Parent/Guardian Name: \*\*If guardian, provide school with a copy of guardian papers.\*\***

Parent/Guardian 2: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Contact Numbers: \_\_\_\_\_

Employer: \_\_\_\_\_

Parent/Guardian 2 is:  Custodian  Authorized to pick up student  Responsible for bill

Family member (only select if resides in the same household as student)  Receives mailings

Special Information about Custody:

**Additional Contacts \*\*Must list at least one additional contact.\*\***

Additional Contact #1 Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Additional Contact #1 is authorized to: (check all that apply)

\_\_\_\_\_ Pick-up student      \_\_\_\_\_ Emergency contact  
\_\_\_\_\_ Is family member (residents in the same household as student)

Additional Contact #2 Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Additional Contact #2 is authorized to: (check all that apply)

\_\_\_\_\_ Pick-up student      \_\_\_\_\_ Emergency contact  
\_\_\_\_\_ Is family member (residents in the same household as student)

Additional Contact #3 Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Additional Contact #3 is authorized to: (check all that apply)

\_\_\_\_\_ Pick-up student      \_\_\_\_\_ Emergency contact  
\_\_\_\_\_ Is family member (residents in the same household as student)

Additional Contact #4 Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Additional Contact #4 is authorized to: (check all that apply)

\_\_\_\_\_ Pick-up student      \_\_\_\_\_ Emergency contact  
\_\_\_\_\_ Is family member (residents in the same household as student)

**Income Information:**

Annual Income: \_\_\_\_\_

Household size: \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

(must be original signature)

# Ethnicity and Race

Student's Name \_\_\_\_\_

Grade: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Please answer BOTH Question 1 AND Question 2**

Question 1: Is this student Hispanic/Latino? **CHOOSE ONLY ONE ETHNICITY:**

NO, not Hispanic/Latino

YES, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

\*The above question is about ethnicity, not race. No matter what you selected above, **please continue to answer the following Question 2** by marking one or more boxes to indicate what you consider your student's race to be.

Question 2: What is the student's race? **CHOOSE ONE OR MORE:**

AMERICAN INDIAN OR ALASKA NATIVE. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

ASIAN. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam.

BLACK OR AFRICAN AMERICAN. A person having origins in any of the black racial groups of Africa.

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

WHITE. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

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**Office use only:**

Ethnicity - Choose only one:

NOT Hispanic/Latino

Hispanic/Latino

Race - Choose on or more:

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Date: \_\_\_\_\_ Staff Signature: \_\_\_\_\_

Additional Requested Information:

**MILITARY**

Student connected to an Active Duty Military family

Yes

No

Student connected to a Guard or Reserve family

Yes

No

**PRESCHOOL**

Head Start

Center-Based Child Care

Home Visitation Program

No Preschool

First Class Funded Preschool

Home-Based Child Care

Other Preschool

Special Education Funded