

**Summer 2026 Countdown to Kindergarten  
APPLICATION INTAKE CHECKLIST  
2026 Summer School**

**Please Print clearly**

Application Date: \_\_\_\_\_ Child's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Child's Name: Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell)

**Please choose what type of care arrangement your child has been in for the past 12 months: (check all that apply)**

- \_\_\_\_\_ Child care center or daycare facility
- \_\_\_\_\_ Home-based child care provider (family daycare)
- \_\_\_\_\_ Care provided by a relative (grandparent, aunt, uncle, etc.)
- \_\_\_\_\_ Care provided by me (parent/guardian/my spouse/partner)
- \_\_\_\_\_ Care provided by a friend or neighbor (non-relative)
- \_\_\_\_\_ Other \_\_\_\_\_ (Please specify)

**Please place a  $\checkmark$  on the line next to the item to indicate that you have completed that task.**

**Please Provide the following if they apply:**

- \_\_\_\_\_ Custody or Court Documentation/Restraining Order paperwork (if applicable/pending)
- \_\_\_\_\_ Permission to discuss Educational/Behavioral needs with Summer School leadership and receiving schools.
- \_\_\_\_\_ IEP/Outside Services (please attach)
- \_\_\_\_\_ Foster Child
- \_\_\_\_\_ In the fall of 2026 my child will be attending (list possible schools/districts for kindergarten placements)  
\_\_\_\_\_  
\_\_\_\_\_

**Please Initial**

\_\_\_\_\_ Summer School program managers will have permission to assess my child on skills obtained in summer school in whatever school they are attending for the purpose of assessing the effectiveness of the program. I understand that this assessment will occur once in the fall of my child's kindergarten year.

**Have you already enrolled in Kindergarten? Yes No Where? \_\_\_\_\_**

I hereby certify that all of the above has been verified (and copied if required) and the application on the above named child is complete to the best of my knowledge./Por la presente certifico que todo lo anterior ha sido verificado (y copiado si es necesario) y que la aplicación del niño mencionado anteriormente está completa según mi leal saber y entender.

**Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_**