



## **DENVER PRESCHOOL PROGRAM**

# **DENVER PUBLIC SCHOOLS**

*Early Childhood Education*



### **Dear DPS Parent/Guardian:**

Denver Public Schools (DPS) and the Denver Preschool Program (DPP) have teamed to help improve the quality of preschool in Denver, and are combining their application process for your convenience. DPS is offering a tuition-based Early Childhood Education (ECE) program for children in their last year of preschool before kindergarten.

DPS is in process of expanding the availability of preschool to better reach our youngest of learners and to ensure the right start for a lifetime of learning. The Denver Preschool Program is the result of a voter approved initiative to provide tuition credits for parents of children in their last year of preschool before kindergarten and improvement grants for preschools.

The Denver Preschool Program will provide tuition credits directly to DPS for children's preschool education based on the family's income, the family's household size, and the quality rating of the classroom in which the child attends. These Tuition Credits have been reflected in the DPS Tuition Rates shown below.

If you are not admitted to a DPS program, you may select other preschools participating in the Denver Preschool Program without reapplying.

The DPS Full-Day Preschool Rate (pre-DPP enrollment) is \$750 per month and the DPS Half-Day Preschool Rate (pre-DPP enrollment) is \$370 per month. Because of the Denver Preschool Program and other funding sources, DPS is pleased to offer full-day preschool for \$390 per month and half-day preschool for \$195 per month. This reduced tuition is only possible when families are approved for the Denver Preschool Program. Depending on family income, tuition may be further reduced. (see tuition chart)

**In order to offer reduced rates, it is mandatory for all families to apply to the Denver Preschool Program.**

To apply for DPS Preschool:

1. Submit the DPS / Denver Preschool Program Application (attached)
2. Submit verification for one month's income: The most current check stub, wage statement, earning, or other work or non-work income documents for each parent/guardian's income. If you are self-employed, you may submit affidavit or tax return.
3. Submit verification of child's age: a copy of the child's Birth Certificate, baptismal record, or hospital record showing birth; children must be 4 years old on or before October 1, 2008, to attend DPS Preschool in the 2008-2009 school year
4. Submit verification of home address: Copy of current lease, or proof of home ownership, or utility bill such as your bill for gas, electric, water or cable.
5. Submit child's immunization record

Parents may be contacted directly by the Denver Preschool Program for further information.

Please complete, sign and return only one DPS /Denver Preschool Program Application even if you are applying to more than one school.

**Families must live in Denver to be eligible for the Denver Preschool Program. Non-Denver residents must pay full tuition.**

[www.DenverPreschoolProgram.org](http://www.DenverPreschoolProgram.org)  
[www.dpsk12.org](http://www.dpsk12.org)



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***INCOME CHART***

Family Size	Tuition Free	Minimum Pay		Semi-Partial Pay		Partial Tuition		Full Pay
	Monthly Gross Income	Monthly Gross Income		Monthly Gross Income		Monthly Gross Income		Monthly Gross Income
	Up to	From	Up to	From	Up to	From	Up to	Greater than
2	\$2,111	\$2,112	\$2,567	\$2,568	\$2,738	\$2,739	\$3,423	\$3,424
3	\$2,647	\$2,648	\$3,219	\$3,220	\$3,434	\$3,435	\$4,293	\$4,294
4	\$3,184	\$3,185	\$3,872	\$3,873	\$4,130	\$4,131	\$5,163	\$5,164
5	\$3,720	\$3,721	\$4,524	\$4,525	\$4,826	\$4,827	\$6,033	\$6,034
6	\$4,257	\$4,258	\$5,177	\$5,178	\$5,522	\$5,523	\$6,903	\$6,904
7	\$4,793	\$4,794	\$5,829	\$5,830	\$6,218	\$6,219	\$7,773	\$7,774
8	\$5,330	\$5,331	\$6,482	\$6,483	\$6,914	\$6,915	\$8,643	\$8,644

***TUITION RATES (after qualifying for Denver Preschool Program tuition credit)***

Non-Refundable Registration Fee		\$15	\$25	\$35	\$50
		TUITION PER MONTH	TUITION PER MONTH	TUITION PER MONTH	TUITION PER MONTH
ECE (Post-DPP) Half-Day Tuition	Tuition-Free	\$30	\$75	\$135	\$195
ECE (Post-DPP) Full-Day Tuition	Tuition-Free	\$60	\$150	\$270	\$390

Applications received before February 22, 2008 will be considered in a First Round lottery. Applications received after February 22<sup>nd</sup> will be accepted on a first-come, first-served basis depending on the number of un-filled spaces from the First Round process.

The Denver Preschool Program will notify parents by letter the amount of their tuition credit. DPS will notify parents of the enrollment status of their child at the school where they applied. To accept or relinquish a space in a DPS Early Childhood Education classroom, parents or guardians will need to submit an Acceptance/ Relinquishment form and, if paying minimum, partial or full tuition, a Financial Agreement form which will be provided with the acceptance notification. *DPS ECE classroom spaces cannot be guaranteed if an Acceptance/Relinquishment form and/or, Financial Agreement with non-refundable registration fee, if necessary, are not submitted.*

**If a parent/guardian is identified as eligible for Colorado Child Care Assistance Program (CCCAP), it will be required that the parent/guardian also apply for CCCAP assistance.**



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## DPS ECE / DENVER PRESCHOOL PROGRAM APPLICATION

### SECTION I: PROGRAM

**NEIGHBORHOOD (ATTENDANCE AREA)** If enrolling in your neighborhood (ATTENDANCE AREA) school & wish to participate in the Early Childhood Education program complete this portion:

NEIGHBORHOOD (ATTENDANCE AREA) SCHOOL \_\_\_\_\_

**OR**

**CHOICE** If choosing a school other than your neighborhood school's ECE program complete this portion:

1<sup>ST</sup> CHOICE SCHOOL \_\_\_\_\_

2<sup>ND</sup> CHOICE SCHOOL \_\_\_\_\_

**Please note:** Your neighborhood school space will only be available during second round Choice (After 2/22/08).

**Preschool Day Preference: (check one)**

I am registering for Full Day Class

I am registering for Part Day Class

CHILD'S FULL LEGAL NAME Last Name: _____ First Name: _____ Middle Name: _____	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	DATE OF BIRTH _____	STATE / COUNTRY OF BIRTH _____
	HOUSEHOLD TELEPHONE: UNLISTED <input type="checkbox"/> YES <input type="checkbox"/> NO		
CHILD'S HOME ADDRESS Street address _____ Apartment Number _____ City _____ State _____ Zip Code _____	ADDRESS OF PERSON APPLYING (IF DIFFERENT FROM CHILD'S) <input type="checkbox"/> Parent <input type="checkbox"/> Guardian		
	Street address _____ Apartment Number _____ City _____ State _____ Zip Code _____		

#### **Parent / Guardian Residing in the Household**

FULL NAME OF PERSON APPLYING FOR CHILD <input type="checkbox"/> Parent <input type="checkbox"/> Guardian Parent/Guardian #1 Last Name: _____ First Name: _____ Middle Name: _____	Work Telephone: _____ ext. _____
	Cell Phone: _____
	Pager: _____ email : _____
Parent/Guardian #2 Last Name: _____ First Name: _____ Middle Name: _____	Work Telephone: _____ ext. _____
	Cell Phone: _____
	Pager: _____ email : _____

**Would you be interested in a tuition-based child care program at this school (child care provided before and after preschool)?**  Yes  No

(for school use only)	<b>OFFICIAL</b>
<b>DATE STAMP</b>	
Birth verification _____	
Proof of Address _____	
Proof of Immunization _____	
Fall grade level confirmed _____	

<b>FOR SCHOOL USE ONLY</b>
Student ID# _____
____ Currently enrolled (1)
____ Sibling – Denver Resident (2)
Sibling ID# _____
____ Family Application

[www.DenverPreschoolProgram.org](http://www.DenverPreschoolProgram.org)  
[www.dpsk12.org](http://www.dpsk12.org)



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**DPS ECE / DENVER PRESCHOOL PROGRAM APPLICATION**

**SECTION I: PROGRAM, continued**

<p>CHILD'S ETHNICITY (check one)</p> <p><input type="checkbox"/> American Indian or Alaskan Native</p> <p><input type="checkbox"/> Asian or Pacific Islander</p> <p><input type="checkbox"/> Black (Not of Hispanic Origin)</p> <p><input type="checkbox"/> Hispanic</p> <p><input type="checkbox"/> White (Not if Hispanic Origin)</p>	<p>CHILD'S LANGUAGE PREFERENCE</p> <p><input type="checkbox"/> English</p> <p><input type="checkbox"/> Spanish</p> <p><input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Arabic</p> <p><input type="checkbox"/> Russian</p> <p><input type="checkbox"/> Other – please specify language spoken</p> <p>_____</p>
<p>. What is the language spoken at home?</p> <p>English    Spanish    Vietnamese    Arabic    Russian    Other- please specify language spoken</p>	
<p>Are you a single parent / guardian working or going to school full time?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If No, are both parents / guardians working or going to school full time</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Are any of the children you are applying for currently participating in the Colorado Child Care Assistance Program also known as (CCCAP)?</p> <p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>If yes, which county? _____</p>	



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**SECTION II: HOUSEHOLD INCOME**

If you do not provide proof of income or wish to opt out of providing income documentation, you will receive the minimum level of tuition credits.

If you are a **NON-DENVER RESIDENT** or are opting for the minimum level of tuition credits, please check here  and proceed to the signature boxes in **SECTION III** on page 7.

Income – Please complete for parent / guardian – DOCUMENTATION REQUIRED as described on page 1 . If you have more than one job, please be certain to list here.					
Name of Person Last Name      First Name		Employer of Business Name	Telephone Number	Self-Employed	Gross Monthly Income/Salary/Wages
				Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>S</b>
				Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>S</b>
				Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>S</b>
				<b>TOTAL HOUSEHOLD WORK INCOME</b>	<b>S</b>
Do you have non-work income such as TANF, food stamps, child support / alimony, trust income, etc? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, please provide in more detail below</b>					
Name of Person Last Name      First Name		Detail	Account / Case number	Monthly Amount Received	
				<b>S</b>	
				<b>S</b>	
				<b>S</b>	
				<b>TOTAL HOUSEHOLD NON-WORK INCOME</b>	<b>S</b>

**Total Monthly Work+Non-Work Income: \$**



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**SECTION II: HOUSEHOLD INCOME, continued**

**List all members in your household.**

Last Name, First, MI	Relation to you?	SEX	DPS Student?	If yes, DPS school Attending
	<b>SELF</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Male <input type="checkbox"/> Female <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

*The Denver Preschool Program does not discriminate against any person on the basis of race, color, religion, national origin, gender, age (except as to the age of the children qualifying for tuition credits), military status, sexual orientation, gender variance, marital status, or physical or mental disability.*

I authorize the Denver Preschool Program to release any information in this Application to the Colorado Child Care Assistance Program (CCCAP) and to receive any information pertinent to this Application from the Colorado Child Care Assistance Program and the Denver Department of Human Services. I further authorize the Denver Preschool Program to review and copy any records pertinent to this Application which may be maintained by Denver Public Schools, CCCAP, Head Start, and the Colorado Preschool and Kindergarten Program (CPKP) and for any program audits. I release Denver Preschool Program from any and all liability arising from the release, review or copying of such information. DPP may require other information in the event of an audit. I declare that the information reported is true, correct, and complete. I agree to provide, if requested, any necessary documentation to support the information reported

Signature of Applicant	Preparer's Signature (If different than parent or guardian)
Applicant's Printed Name	Preparer's Printed Name (If different than parent or guardian)
Date (mm-dd-yy)	Date (mm-dd-yy)



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**SECTION III: PARENT AGREEMENT**

This Agreement is entered into by the Denver Preschool Program, Inc (“DPP”) and

Parent / Guardian \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

The following are the basic terms of the Agreement:

- ❖ Parent agrees to allow *their DPP enrolled* child to participate in the DPP Assessment and Evaluation procedures with the understanding that individual evaluation results will only be shared with DPP consultants unless express approval of the DPP and the parent is given for sharing information with others.
- ❖ Parent understands the importance of the child being in attendance in preschool whenever the preschool is in session and agrees to notify the provider if the child is going to be absent and the reason for the absence when appropriate.
- ❖ It is the responsibility of the Parent to comply with the rules and regulations of Denver Public Schools and the DPP, including those relating to absences. Parent understands that DPP can terminate the tuition credit if the Parent or child fails to comply with these rules and regulations.
- ❖ Parent understands that the child’s attendance in school will be monitored.
- ❖ Parent understands that the tuition credit is determined in accordance with the DPP approved formula that takes into account parental income, family size, the quality rating of the provider, and the authorized tuition charge of the provider.

Parent or Guardian signature \_\_\_\_\_

Parent or Guardian printed name \_\_\_\_\_

**For questions about the tuition credit or other issues related to this agreement, Parent / Guardian should contact**

**The Denver Preschool Program  
720 264-4555 or  
1550 Larimer Street #264 Denver, CO 80202**



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**SECTION IV: EVALUATION AGREEMENT**

Denver Preschool Program is partnering with two consultants; APA Inc. and the Clayton Institute, to conduct an in-depth study of the Denver Preschool Program to measure the difference preschool makes for children and their families. Any family that participates in the DPP can volunteer to be a part of the evaluation study. If you volunteer and are selected to participate, your child will be assessed by a trained early childhood professional using a 20-30 minute standardized test at his or her preschool in the fall and in the spring. You will also be asked to complete a short survey in the spring. Analysis will be of group data, and no one will be identified individually. You will be compensated for your participation.

Are you willing to have someone contact you to tell you more about the evaluation study? \_\_\_\_ Yes \_\_\_\_ No

Name of Parent/Guardian: \_\_\_\_\_

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

Name of Child: \_\_\_\_\_

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

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

*(Signature)*

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Name of provider requested by parent & date approved by DPP: \_\_\_\_\_

Parent Agreement effective: \_\_\_\_\_ to \_\_\_\_\_

Denver Preschool Program, Inc., Authorized ACS Manager \_\_\_\_\_

**(VERIFIED AGENT USE)**

DPP Enrollment Date: \_\_\_\_\_ Provider Star Rating  0  1  2  3  4

Application Number: \_\_\_\_\_

DPS Student ID# \_\_\_\_\_

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

Provider's License Number \_\_\_\_\_

Name of primary cardholder: \_\_\_\_\_ Card #1 \_\_\_\_\_

Name of alternate cardholder \_\_\_\_\_ Card #2 \_\_\_\_\_

Tuition Credit \_\_\_\_\_ Preschool Participation  Full Day  Half Day