



THE SCHOOL DISTRICT OF
PHILADELPHIA

Preschool Application

for Academic Year

2021-2022

District and Childcare Partners

Full Day Pre-K!

Ages 3-5

3 yrs old before Sept 1st, 2021

5 yrs old after Sept 1st, 2021

Program Benefits

Free Nutritious Meals
High-Quality Curriculum
Access to Nurses
Special Needs Support
Parent Participation

The School District of Philadelphia
440 N Broad Street
Suite 170 – Preschool Program
Philadelphia, PA 19130-4015



Thank you for your interest in the School District of Philadelphia's preschool program! Completing and submitting a Preschool Application does not guarantee that your child will be accepted to a preschool program. For your best chance at acceptance, please submit your child's completed application on or before February 28th, 2021.

1. Complete ALL necessary steps below. As you collect each item, check off the box.

Applications will not be accepted without all supporting documentation.

- I have filled out the entire application
- I have proof of child's date of birth (Birth certificate, health insurance card, etc.)
- I have documentation of family income (Tax forms, 4 consecutive paystubs, or financial support letter)
- I have proof of Philadelphia residency (bill, driver's license, lease, etc.)
- I have my child's health insurance card
- I have my child's physical (health assessment within the year) **and immunizations**
- I have proof of child's dental visit (within the year)
- I have picture identification of parent/guardian (Current State or Federal Photo ID)
- I have proof of TANF (DPW) cash, SNAP/food stamps, medical assistance (*if applies to you*)
- I have a custody order (*if applies to you*)
- I have a foster letter (*if applies to you*)
- I have a homeless verification letter/shelter letter (*if applies to you*)

2. Are you applying to a School-Based Location (pg. 3)? Bring the application and required documentation down to 440 North Broad. We are open M-F 8:30 am – 4 pm.

3. Are you applying to a Community Partner Location (pg. 4-6)? Take the application and supporting documents directly to that agency.

2021-2022 SCHOOL-BASED PRESCHOOL LOCATIONS

Locations are listed in Zip Code Order

**TO APPLY FOR ONE OF THESE LOCATIONS, SUBMIT YOUR CHILD'S APPLICATION TO:
THE SCHOOL DISTRICT OF PHILADELPHIA, 440 N. BROAD STREET, SUITE 170, PHILADELPHIA, PA 19130**

NAME	ADDRESS	ZIP
McMichael Elementary	3543 Fairmount Ave.	19104
Holme Elementary	9120 Academy Rd.	19114
George Washington High	10175 Bustelton Ave	19116
Loesche Elementary	595 Tomlinson Rd.	19116
Emlen Elementary	6501 Chew Ave.	19119
Lowell Elementary	450 W. Nedro Ave.	19120
T. Marshall Elementary	5120 N. 6th St.	19120
Blaine Elementary	3001 W. Berks St.	19121
W.D. Kelley Elementary	1601 N. 28th St.	19121
Meade Elementary	1600 N. 18th St.	19121
Duckrey Elementary	1501 W Diamond St	19121
Gideon Elementary	2817 W Glenwood	19121
McKinley Elementary	2101 N. Orkney St.	19122
Hackett Elementary	2161 E. York St.	19125
Ellwood Elementary	6701 N. 13th St.	19126
Shawmont Elementary	535 Shawmont Ave.	19128
Cook-Wissahickon Elementary	201 E. Salaigac St.	19128
Mifflin Elementary	3624 Conrad St.	19129
Bache-Martin Elementary	2201 Brown St.	19130
Blankenburg Elementary	4600 W. Girard Ave.	19131
Heston Elementary I	1621 N. 54th St.	19131
Dr. Ethel Allen Academy	3200 W. Lehigh Ave.	19132
Pratt Early Childhood Center	2200 N. 22nd St.	19132
Wright Elementary	2700 W. Dauphin St.	19132
Hunter Elementary	2400 N. Front St.	19133
Webster Elementary	3400 Frankford Ave.	19134
Lawton Elementary	6101 Jackson St.	19135
Lincoln High	3201 Ryan Ave.	19136
Forrest Elementary	7300 Cottage St.	19136
A.B. Day Elementary	1201 E. Johnson St.	19138
Pennypacker Elementary	1858 E. Washington	19138
Haverford Center	4601 Haverford Ave.	19139
Barry Elementary	5900 Race St.	19139
Lea Elementary	4700 Locust St.	19139
Cleveland Charter	3701 N. 19th St.	19140

NAME	ADDRESS	ZIP
McClure Elementary	600 W. Hunting Park	19140
Edison High	151 W. Luzerne St.	19140
Bethune Elementary	3301 Old York Rd.	19140
Cramp Elementary	3449 N. Mascher St.	19140
Muñoz-Marín Elementary	3300 N. 3rd St.	19140
Steel Elementary	4301 Wayne Ave.	19140
Bayard Taylor Elementary	3698 N Randolph St,	19140
Logan Elementary	1700 Lindley Ave.	19141
Pennell Elementary	1800 Nedro Ave.	19141
Prince Hall Elementary	6101 N. Gratz St.	19141
Catharine Annex	6900 Greenway Ave	19142
Patterson Elementary	7000 Buist St.	19142
Anderson Elementary	1034 S. 60th St.	19143
Bryant Elementary	6001 Cedar Ave.	19143
Longstreth Elementary	5700 Willows Ave.	19143
Turner Center	5900 Baltimore Ave.	19143
Wister Mastery Charter	67 E. Bringhurst St.	19144
Bregy Elementary	1700 Bigler St.	19145
E. Vare Universal Charter	2100 S. 24th St.	19145
E.M. Stanton Elementary	1700 Christian St.	19146
Childs Elementary	1599 Wharton St.	19146
Nebinger Elementary	601 Carpenter St.	19147
Jackson Elementary	1213 S. 12th St.	19147
Kirkbride Elementary	1501 S. 7th St.	19147
A. Vare @ George Washington	1198 S. 5th St.	19147
South Philadelphia High	2101 S. Broad St.	19148
Sharswood Elementary	2300 S. 2nd St.	19148
Southwark Elementary	1835 S. 9th St.	19148
Taggart Elementary	400 Porter St.	19148
Spruance Elementary	6401 Horrocks St.	19149
F.S. Edmonds Elementary	8025 Thouron Ave.	19150
Lamberton Elementary	7501 Woodbine Ave	19151
Rhawnhurst Elementary	7809 Castor Ave.	19152
Fitzpatrick Elementary	4101 Chalfont Dr.	19154

2021-2022 COMMUNITY PARTNER PRESCHOOL LOCATIONS

Locations are listed in Zip Code order

Free preschool programming is offered in the Community Partner Agencies listed below (based on your family’s program eligibility). Partner Agencies manage their own applications and enrollment process. **TO APPLY FOR ONE OF THESE LOCATIONS, HAND-DELIVER YOUR CHILD’S APPLICATION DIRECTLY TO THE COMMUNITY PARTNER AGENCY.**

PARTNER AGENCY	Address	Zip	Phone #	Program	OFFERING VIRTUAL OPTION	BEFORE /AFTER CARE (payment required)
BRIGHTSIDE ACADEMY - MARKET ST.	4011-13 MARKET ST.	19104	(215) 386-0910	HS / PKC	Yes	Yes
CARING PEOPLE ALLIANCE (WEST)	3512 HAVERFORD AVE.	19104	(215) 386-4075	HS / PKC	No	Yes
COMMUNITY ED. ALLIANCE OF W. PHILA.	907 N. 41ST ST.	19104	(215) 386-5768	HS	Yes	Yes
Wonderspring Powelton Village [Formerly MELC]	3939 WARREN ST.	19104	(215) 382-2499	PKC /CPK	No	Yes
PARENT-INFANT CENTER	4205 SPRUCE ST.	19104	(215) 222-5480	PKC	No	Yes
SOUND START	2970 MARKET ST.	19104	(267) 466-1600	PKC	No	Yes
CHILDREN'S VILLAGE	125 N. 8TH ST.	19106	(215) 931-0190	HS / PKC	Yes	Yes
GREEN BYRNE CHILD CARE CENTER	600 ARCH ST.	19106	(215) 861-3606	PKC	No	Yes
CHINATOWN LEARNING CENTER	1001 VINE STREET, 3RD FLOOR	19107	(215) 922-4227	HS	Yes	Yes
ANN KIDS - PALMETTO	6200 PALMETTO ST.	19111	(215) 214-5539	PKC	Yes	Yes
GNDC - BETHANY ACADEMY	6537 RISING SUN AVE.	19111	(215) 742-1300	HS	No	Yes
GNDC - SOANS CHRISTIAN ACADEMY	7912 DUNGAN RD.	19111	267-388-7648	HS / PKC	No	Yes
KEN-CREST - NORTHEAST	7200 RISING SUN AVE.	19111	(215) 342-9800	PKC	Yes	Yes
KINDER ACADEMY - CASTOR	7332 ELGIN AVE.	19111	(267) 571-6800	HS / PKC	Yes	Yes
KINDER ACADEMY – TRINITY	6901 RISING SUN AVE.	19111	(267) 571-5661	HS / PKC	Yes	Yes
JUST CHILDREN - GRANT	2901 GRANT AVE.	19114	(215) 677-1711	PKC	No	Yes
BAMBI DAY CARE CENTER	500 RED LION RD.	19115	(215) 464-8623	PKC	No	Yes
ANN KIDS	10100 JAMISON AVE.	19116	(267) 291-0111	PKC	Yes	Yes
FEDERATION EARLY LEARNING - LASSIN	10800 JAMISON AVE.	19116	(215) 725-8930 x155	HS / PKC	No	Yes
CHILDSpace MAIN (MT. AIRY)	7406 GERMANTOWN AVE.	19119	(215) 248-3080	HS	No	Yes
AIGEN - FRANKLIN DAY NE	5416 RISING SUN AVE.	19120	(267) 428-5814	HS	No	Yes
ASPIRA (Pequeños Pasos de ASPIRA)	6301 N. 2ND ST.	19120	(215) 324-7012	HS / PKC	Yes	No
KEN-CREST - ADAMS	575 ADAMS AVE.	19120	(215) 815-0641	HS / PKC	Yes	Yes
RISING SUN CHILDREN'S CENTER	5224 RISING SUN AVE.	19120	(215) 457-7730	PKC	Yes	Yes
TODAY'S CHILD - FELTONVILLE CENTER	4901 RISING SUN AVE.	19120	(215) 456-3005	HS	No	No

2021-2021 COMMUNITY PARTNER PRESCHOOL LOCATIONS

PARTNER AGENCY	Address	Zip	Phone #	Program	OFFERING VIRTUAL OPTION	BEFORE /AFTER CARE (payment required)
COMMUNITY CONCERN #13	2721 CECIL B. MOORE AVE.	19121	(215) 236-5024	PKC	Yes	Yes
YMCA - NORTH	1400 N. BROAD ST.	19121	(215) 235-6440	PKC /PHL	No	Yes
CARING PEOPLE ALLIANCE (R. W. Brown)	1701 N. 8TH St.	19122	(215) 763-0900	PKC	No	Yes
NORRIS SQUARE - CHILDREN'S CENTER	2011 N. MASCHER ST.	19122	(215) 634-2251	HS	Yes	Yes
BRIGHTSIDE ACADEMY - ERIE & CASTOR	1500 E. ERIE AVE.	19124	(215) 533-6321	HS	Yes	Yes
GNDC - GRACE NEIGHBORHOOD ACADEMY	5221 OXFORD AVE.	19124	(215) 535-8200	HS / PKC	No	Yes
GRACE TRINITY DAY CARE CENTER	5200 OXFORD AVE.	19124	(215) 535-3885	PKC	No	Yes
PRATT STREET LEARNING CENTER	899 PRATT ST.	19124	(215) 289-1940	HS / PKC	Yes	Yes
SPIN - FRANKFORD	1642 ORTHODOX ST.	19124	(215) 831-3184	HS / PKC	Yes	Yes
SPIN - FRANKFORD ANNEX	1642 ORTHODOX ST.	19124	(215) 831-3184	HS / PKC	Yes	Yes
BRIGHTSIDE ACADEMY - KELLY'S CORNER	2501 KENSINGTON AVE.	19125	(215) 739-7466	HS / PKC	Yes	Yes
CORA Early Years Huntingdon Mills	2137 E. Huntingdon Street	19125	215-701-2601	PKC / PHL	No	Yes
KEN-CREST - LEHIGH	2600 B ST.	19125	(215) 427-1570	HS / PKC	Yes	Yes
YOUR CHILD'S WORLD - MAIN	6801-17 N 16th St.	19126	(267) 766-6454	HS / PKC	Yes	Yes
YMCA - ROXBOROUGH	7219 RIDGE AVE.	19128	(215) 482-3900	PKC	No	Yes
YOUNG WORLD EARLY LEARNING CTR.	1737 FAIRMOUNT AVE.	19130	(215) 763-7656	HS / PKC	No	Yes
BRIGHTSIDE ACADEMY - 48TH and LANCASTER	4829 LANCASTER AVE.	19131	215-879-0162	PKC	Yes	Yes
METHODIST SERVICES/EDUCARE HEAD START	4300 MONUMENT RD.	19131	(215) 877-1925 x.610	HS	Yes	Yes
METHODIST SERVICES/PHL PREK	4300 MONUMENT RD.	19131	(215) 877-1925 x.188	CPK	Yes	Yes
BRIGHTSIDE ACADEMY - W. ALLEGHENY	2300 W. ALLEGHENY AVE.	19132	(215) 226-0691	HS	Yes	Yes
TOTAL CHILDCARE/PRODIGY LEARNING	3345 W. HUNTING PK. AVE.	19132	(215) 228-7678	PKC	Yes	Yes
APM - Main	2318 N. MARSHALL ST.	19133	(215) 839-3313	HS/PKC/PHL	Yes	Yes
APM - RIVERA CENTER	2603-11 N. 5TH ST.	19133	(267) 773-6098	HS	Yes	No
APM - TRINIDAD CENTER	1038 W. SEDGLEY AVE.	19133	(215) 995- 2099	HS	Yes	No
BRIGHTSIDE ACADEMY - PLAZA	217 W. LEHIGH AVE.	19133	(215)203-0494	HS / PKC	Yes	Yes
LIGHTHOUSE	152 W. LEHIGH AVE.	19133	(215) 425-7800	HS / PKC	Yes	Yes
BRIGHTSIDE ACADEMY - C & ALLEGHENY	341 E. ALLEGHENY AVE.	19134	(215) 291-5525	HS	Yes	Yes
BRIGHTSIDE ACADEMY - HARROWGATE	3528 I ST.	19134	(215) 426-7300	HS	Yes	Yes

PARTNER AGENCY	Address	Zip	Phone #	Program	OFFERING VIRTUAL OPTION	BEFORE /AFTER CARE (payment required)
BRIGHTSIDE ACADEMY - K & A	1819 E. ALLEGHENY AVE.	19134	(215) 426-7403	HS	Yes	Yes
KEN-CREST - KENSINGTON	901 E. ONTARIO ST.	19134	(215) 739-4547	HS / PKC	Yes	Yes
NORRIS SQUARE - WILLARD	3070 FRANKFORD AVE.	19134	(215) 291-4143	HS	Yes	No
CREATIVE LEARNING ENVIRONMENTS	4800 LONGSHORE AVE.	19135	(215) 332-2360	HS	Yes	Yes
CREATIVE LEARNING ENVIRONMENTS II	4824 PRINCETON AVE.	19135	(267) 686-5992	HS / PHL	Yes	No
GNDC - ST. STEPHENS DAY CARE	4201 PRINCETON AVE.	19135	(215) 624-3262	PKC	No	Yes
BRIGHTSIDE ACADEMY - N. 48th ST.	801 N. 48th ST.	19139	(215) 879-7206	HS	Yes	Yes
APM - RISING SUN	4221 N. 2nd ST.	19140	(267) 296-7357	HS / PKC	Yes	Yes
BRIGHTSIDE ACADEMY - 3RD & WESTMORELAND	3230 N. 3RD ST.	19140	(215) 634-3018	HS / PKC	Yes	Yes
BRIGHTSIDE ACADEMY - COURTLAND	543 W. COURTLAND ST.	19140	(215) 329-0614	HS	Yes	Yes
KEN-CREST - NORTH	3907 N. BROAD ST.	19140	(215) 227-0534	HS / PKC	Yes	Yes
MERCY NEIGHBORHOOD MINISTRIES	1939 W. VENANGO ST.	19140	(215) 227-4393	HS / PKC	Yes	Yes
PORTERS DAY CARE	1434-38 BELFIELD AVE.	19140	(215) 329-2300	HS / PKC	No	Yes
BRIGHTSIDE ACADEMY - 4920. N. BROAD	4920. N. BROAD ST.	19141	(215) 457-5708	HS	Yes	Yes
PRECIOUS ANGELS	6100 N. BROAD ST.	19141	(215) 224-6880	HS / PKC	Yes	Yes
YOUR CHILD'S WORLD - ELMWOOD	2406 S. 71ST ST.	19142	(267) 233-7031	HS / PHL	Yes	Yes
ALGEN - HARVARD CHILDREN'S	4900 BALTIMORE AVE.	19143	(215) 729-9900	HS	No	Yes
BRIGHTSIDE ACADEMY - 56TH & WOODLAND	5600 WOODLAND AVE.	19143	(215) 727-1576	HS / PKC	Yes	Yes
KEN-CREST - WEST	5900 ELMWOOD AVE.	19143	(215) 726-2310	HS / PKC	Yes	Yes
CHILDSPACE TOO (G'TOWN)	5517 GREENE ST.	19144	(215) 849-1660	HS	Yes	Yes
CORA EARLY YEARS AT LASALLE	2 PENN BLVD Suite #220	19144	(267) 385-3436	PKC	No	Yes
MERCY NEIGHBORHOOD @ FACE-to-FACE	123 E. PRICE ST.	19144	(215) 227-4393	HS	Yes	Yes
SETTLEMENT MUSIC SCHOOL - G'TOWN	6128 GERMANTOWN AVE.	19144	(215) 320-2618	HS	Yes	No
CHILDREN'S PLAYHOUSE - NEWBOLD	1426 PASSYUNK AVE.	19145	(267) 519-2124	HS / PKC	No	Yes
DIVERSIFIED COMM. SVCS. - DIXON	2201 MOORE ST.	19145	(215) 334-2662	HS	Yes	Yes
DIVERSIFIED COMM. SVCS. - WESTERN	1613-21 SOUTH ST.	19146	(215) 735-1261	HS / PKC	Yes	Yes
EARLY CHILDHOOD ENVIRONMENTS	762 S. BROAD ST.	19146	(215) 844-0178	HS	Yes	Yes
SETTLEMENT MUSIC SCHOOL - QUEEN ST.	416 QUEEN ST.	19147	(215) 320-2670	HS	Yes	Yes

PARTNER AGENCY	Address	Zip	Phone #	Program	OFFERING VIRTUAL OPTION	BEFORE /AFTER CARE (payment required)
ALGEN - FRANKLIN DAY NURSERY	719 JACKSON ST.	19148	(215) 389-2991	HS	Yes	Yes
CHILDREN'S PLAYHOUSE - WHITMAN	2501 S. MARSHALL ST.	19148	(215) 372-7050	HS / PKC	No	Yes
KEN-CREST - SOUTH	504 MORRIS ST.	19148	(215) 271-8908	HS / PKC	Yes	Yes
YOUTH ENRICHMENT/DISCOVERY PLACE	2029-33 S. 7TH ST.	19148	(215) 755-7588	PKC	Yes	Yes
BRIGHTSIDE ACADEMY - CASTOR	6000 CASTOR AVE.	19149	(215) 289-9103	HS / PHL	Yes	Yes
KINDER ACADEMY - OXFORD CIRCLE	900 E. HOWELL ST.	19149	(267) 571-6800	HS/PKC /PHL	Yes	Yes
PRATT STREET LEARNING CENTER IN BUSTLETON	6600 BUSTLETON AVE.	19149	(215) 383-2320	HS	Yes	Yes
YOUR CHILD'S WORLD - HARBISON	6595A ROOSEVELT BLVD.	19149	(215) 289-2026	HS / PKC	Yes	Yes
LITTLE PEOPLE'S VILLAGE	904 N. 66TH ST.	19151	(215) 878-3011	PKC	Yes	Yes
LITTLE PEOPLE'S VILLAGE II	6522 HAVERFORD AVE.	19151	(215) 474-3011	HS / PKC	Yes	Yes
A STEP AHEAD DAY CARE	7802 CASTOR AVE.	19152	(215) 722-4700	PKC	Yes	Yes
FEDERATION EARLY LEARNING - PALEY	2199 STRAHLE ST.	19152	(215) 725-8930 x155	HS / PKC	No	Yes
KINDER ACADEMY - RHAWNURST	7922 BUSTLETON AVE.	19152	(215) 728-7700	PKC	Yes	Yes
KINDER ACADEMY - PARKWOOD	3001 BYBERRY RD.	19154	(215) 612-1776	PKC	Yes	Yes
SPIN - DRUMMOND (NE)	10521 DRUMMOND RD.	19154	(215) 612-7181	HS	Yes	Yes
SPIN - PARKWOOD	10541 DRUMMOND RD.	19154	(267) 230-8231	PKC	Yes	Yes
YMCA - NE	11088 KNIGHTS RD.	19154	(215) 632-0100	PKC	No	Yes

2021-2021 COMMUNITY PARTNER PRESCHOOL LOCATIONS

PRIMARY PARENT					
The adult who is primarily responsible for the care and well-being of the child.					
First Name:			Last Name:		
Date of Birth:			Gender: <input type="radio"/> Male <input type="radio"/> Female		
Primary language:			Other language(s):		
Home Address:					
Apt./Unit #:		City:		State:	Zip Code:
Phone #:			Email Address:		
# of People in household				# of People in family	
Marital Status Select one	<input type="radio"/> Married	<input type="radio"/> Single	<input type="radio"/> Widowed	<input type="radio"/> Separated/Divorced	
Relationship to Child Select one	<input type="radio"/> Parent/Step-Parent		<input type="radio"/> Grandparent		
	<input type="radio"/> Foster/Kinship Parent, related to child		<input type="radio"/> Foster Parent, not related to child		
	<input type="radio"/> Guardian, related to child		<input type="radio"/> Guardian, not related to child		
	<input type="radio"/> Other (specify):		<input type="radio"/> Teen Parent – parent was under the age of 18 when child was born		
Race/Ethnicity Select all that applies	<input type="radio"/> Hispanic or Latino/a	<input type="radio"/> American Indian		<input type="radio"/> Asian	
	<input type="radio"/> Black or African American	<input type="radio"/> Multi-Racial or Bi-Racial		<input type="radio"/> Native Hawaiian	
	<input type="radio"/> Pacific Islander	<input type="radio"/> White		<input type="radio"/> Other (specify):	
Education Select highest Diploma/Degree earned or highest Grade Level completed	<input type="radio"/> High School Diploma	<input type="radio"/> GED		<input type="radio"/> ESL – English as a Second	
	<input type="radio"/> Some college/Vocational/Associates		<input type="radio"/> Bachelors/Advanced degree		
	<input type="radio"/> 11 th Grade	<input type="radio"/> 10 th Grade		<input type="radio"/> 9 th Grade or lower	
Employment, School, Job Training Select all that applies	<input type="radio"/> Employed/Self-Employed	<input type="radio"/> Unemployed/Not Employed		<input type="radio"/> Disabled	
	<input type="radio"/> Member of the U.S. military on active duty		<input type="radio"/> Veteran of the U.S. military		
Do you have health insurance? If 'Yes', name of health insurance provider:				<input type="radio"/> Yes	<input type="radio"/> No
Are you pregnant?	<input type="radio"/> Yes	<input type="radio"/> No	Are you receiving mental health treatment?		<input type="radio"/> Yes <input type="radio"/> No
Do you receive benefits?	<input type="radio"/> WIC	<input type="radio"/> SNAP	<input type="radio"/> Medical	<input type="radio"/> TANF Cash	<input type="radio"/> SSI
SECONDARY PARENT					
An adult who shares in the care of the child.					
First Name:			Last Name:		
Date of Birth:			Gender: <input type="radio"/> Male <input type="radio"/> Female		
Employment, School, Job Training Select all that applies	<input type="radio"/> Employed/Self-Employed	<input type="radio"/> Unemployed/Not Employed		<input type="radio"/> Disabled	
	<input type="radio"/> Member of the U.S. military on active duty		<input type="radio"/> Veteran of the U.S. military		
LOCATIONS					
CHOOSE THE LOCATION(S) WHERE YOU WOULD LIKE: Your child may be selected for your second choice. Do not put a location that you are not willing or able to take your child regularly and on time. Transportation is not provided.					
1 st Location Choice:			2 nd Location Choice:		

PREK CHILD				
First Name:		Last Name:		
Date of Birth:		Gender: <input type="radio"/> Male <input type="radio"/> Female		
Race/Ethnicity Select all that applies	<input type="radio"/> Hispanic or Latino/a	<input type="radio"/> American Indian	<input type="radio"/> Asian	
	<input type="radio"/> Black or African American	<input type="radio"/> Multi-Racial or Bi-Racial	<input type="radio"/> Native Hawaiian	
	<input type="radio"/> Pacific Islander	<input type="radio"/> White	<input type="radio"/> Other (specify):	
Primary language:		Other language(s):		
Child is receiving Early Intervention services:		<input type="radio"/> IEP	<input type="radio"/> EFSP	<input type="radio"/> ER <input type="radio"/> Suspected
Child's mother and/or father is currently incarcerated:			<input type="radio"/> Yes	<input type="radio"/> No

HOUSING				
Housing Information Select your current situation	<input type="radio"/> Own	<input type="radio"/> Rent	<input type="radio"/> Transitional housing – Since what date?	
	<input type="radio"/> Shelter – Since what date?		<input type="radio"/> Train or bus station, park or in car – Since what date?	
	<input type="radio"/> Living with relatives or others to due to lack of alternative, adequate housing or due to the loss of housing – Since what date?		<input type="radio"/> Hotel/Motel, camping ground or other similar situation due to lack of alternative, adequate housing or due to the loss of housing– Since what date?	
	<input type="radio"/> Temporary housing situation due to emergency: eviction, flood, fire, hurricane, etc.		<input type="radio"/> Abandoned apartment building	
	<input type="radio"/> Other _____			
Optional Information	New to the country?			<input type="radio"/> Yes <input type="radio"/> No
	Has an agency such as HIAS, NSC, Bethany, JEVS, New World Association, AFAHO, or other worked with you?			<input type="radio"/> Yes <input type="radio"/> No

FAMILY INCOME					
Primary Caregiver Income			Secondary Caregiver Income		
Employment Type	Amount	Frequency	Employment Type	Amount	Frequency
<input type="radio"/> Employment			<input type="radio"/> Employment		
<input type="radio"/> SSI/ TANF CASH			<input type="radio"/> SSI/ TANF CASH		
<input type="radio"/> Unemployment			<input type="radio"/> Unemployment		
<input type="radio"/> Other: _____			<input type="radio"/> Other: _____		

I understand that this information will be used to create my Parent Portal COPA account, and I will receive an email with my sign-in information at the email given on this form. I understand that my application is not complete until I sign in and upload my all supporting documentation.

Completing a Parent Portal COPA Account and submitting and finalizing an application does NOT guarantee that my child will be accepted to a preschool program.

Parent Signature: _____

Date: _____

Staff Signature: _____

Date: _____

#2: CHILD HEALTH ASSESSMENT/PHYSICAL EXAM FORM

Child's Name (Last):	Child's Name (First):	Child's Date of Birth:				
Parent/Guardian Name:	Address:	Contact Phone #:				
<p>PA child care providers must document that enrolled children have received age-appropriate health services and immunizations that meet the current schedule of the American Academy of Pediatrics, 141 Northwest Point Blvd., Elk Grove Village, IL, 60007. The schedule is available at www.aap.org or Faxback 847/758-0391 (document #9535 and #9807). Print copies provided by DPW have the schedule on the back of the form.</p>						
Health history and medical information pertinent to routine care and emergencies (describe, if any): <input type="checkbox"/> NONE	DATE OF MOST RECENT WELL-CHILD/PHYSICAL EXAM:					
Allergies to food or medicine (describe, if any): <input type="checkbox"/> NONE	Do not omit any information. This form may be updated by health professional (initial and date new data).					
IN YOUR ASSESSMENT, IS THE CHILD ABLE TO PARTICIPATE IN CHILD CARE AND DOES THE CHILD APPEAR TO BE FREE FROM CONTAGIOUS OR COMMUNICABLE DISEASES? <input type="checkbox"/> YES <input type="checkbox"/> NO - IF NO, PLEASE EXPLAIN YOUR ANSWER:						
LENGTH/HEIGHT	WEIGHT	BLOOD PRESSURE				
_____ IN/CM %ILE _____	_____ LB/KG %ILE _____	(BEGINNING AT AGE 3) _____ / _____				
PHYSICAL EXAMINATION	<input checked="" type="checkbox"/> = NORMAL	IF ABNORMAL - COMMENTS				
HEAD/EYES/EARS/NOSE/THROAT						
TEETH						
CARDIORESPIRATORY						
ABDOMEN/GI						
GENITALIA/BREASTS						
EXTREMITIES/JOINTS/BACK/CHEST						
SKIN/LYMPH NODES						
NEUROLOGIC & DEVELOPMENTAL						
IMMUNIZATIONS	DATE	DATE	DATE	DATE	DATE	COMMENTS
DTap/DTP/Td						
POLIO						
HIB						
HEP B						
MMR						
VARICELLA						
MENINGOCOCCAL						
PNEUMOCOCCAL						
INFLUENZA						
HEP A						
ROTAVIRUS						
OTHER/TB						
SCREENING TESTS	DATE OF TEST	NOTE HERE IF RESULTS ARE PENDING OR ABNORMAL				
LEAD						
ANEMIA (HGB/HCT)						
URINALYSIS (UA) at age 5						
HEARING (subjective until age 4)						
VISION (subjective until age 3)						
PROFESSIONAL DENTAL EXAM						
HEALTH PROBLEMS OR SPECIAL NEEDS, RECOMMENDED TREATMENT/MEDICATIONS/SPECIAL CARE (attach additional sheets if necessary) <input type="checkbox"/> NONE						
MEDICAL CARE PROVIDER:			NEXT APPOINTMENT – MONTH/YEAR:			
ADDRESS:			SIGNATURE OF PHYSICIAN OR CRNP:			
ZIP CODE:						
PHONE:		LICENSE NUMBER:		DATE FORM SIGNED:		

#3: CHILD DENTAL HEALTH/DENTAL EXAM FORM

Child's Name _____ Date of Birth _____

SECTION 1: Completed by parent/guardian

1. Has your child been to the dentist? No Yes – if 'Yes', date of child's last dental visit _____
2. Does your child have (or had) cavities or caries? No Yes – If 'Yes', how many? _____
3. Does your child have any problems with his/her teeth, gums, or mouth? No Yes
If 'Yes', please describe _____
4. How many times a day does your child brush his/her teeth? _____

SECTION 2: Completed by child's Dentist

1. Date of child's most recent:
Dental Examination _____ Teeth Cleaning _____ Fluoride Treatment _____
2. Has child ever needed dental treatment? No Yes
If Yes, type of dental treatment _____
Has dental treatment been completed? No Yes – if 'Yes', date of completion _____
3. Date of child's next dental visit _____

Dental Office Stamp

My signature certifies the accuracy of this information.

Dentist's Signature _____

Date _____



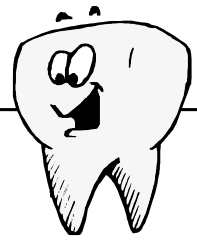
IT'S TIME TO GO TO THE DENTIST!

Please Note:

- Addresses and phone numbers may change over time; call before visiting any of the providers listed below.
- For additional dental providers and/or information, please refer to the following:
 - 1-800-DENTIST (Toll-free, nationwide)
 - 215-925-6050 – Philadelphia County Dental Society (for private dentists in your area)
 - American Academy of Pediatric Dentistry - www.aapd.org
 - American Dental Association - www.mouthhealthy.org
 - PCCY (Public Citizens for Children and Youth) - 215-563-5848 - www.pccy.org/issues/child-health/dental
 - Philadelphia Department of Public Health - www.phila.gov/health/services/Serv_DentalCare.html

PHILADELPHIA DEPARTMENT OF PUBLIC HEALTH – CITY HEALTH CENTERS

HEALTH CENTER #2 1930 S. Broad St., Unit #14, 19145 215-685-1822	HEALTH CENTER #3 555 S. 43 rd St., 19104 215-685-7506	HEALTH CENTER #4 4400 Haverford Ave., 19104 215-685-7605	HEALTH CENTER #5 1900 N. 20 th St., 19121 215-685-2938
HEALTH CENTER #6 301 W. Girard Ave., 19123 215-685-3816	HEALTH CENTER #9 131 E. Cheltenham Ave., 19144 215-685-5738	HEALTH CENTER #10 2230 Cottman Ave., 19149 215-685-0608	



FEDERALLY QUALIFIED HEALTH CENTERS

ESPERANZA HEALTH CENTER 3156 Kensington Ave., 19134 215-302-3156	FAIRMOUNT HEALTH CENTER 1412 Fairmount Ave., 19130 215-684-5349	MARIA DE LOS SANTOS 401 W. Allegheny Ave., 19133 215-291-2509
ABBOTTSFORD-FALLS 4700 Wissahickon Ave., Suite 110, 19144 215-843-9720	HEALTH ANNEX 6120-B Woodland Ave., 19142 215-727-4721	STEPHEN & SANDRA SHELLER (11TH ST. FAMILY HEALTH) 850 N. 11 th St., 19123 215-769-1100

ST. CHRISTOPHER'S
 Pediatric Dentistry
 3601 A. St., 19134
 215-427-5065

TEMPLE
 School of Dentistry
 3223 N. Broad St., 19140
 215-707-2863

PENN DENTAL MEDICINE
 Pediatric Dentistry
 240 S. 40th St., 19104
 215-898-8965

CAVITY BUSTERS

240 Geiger Rd., 19115
 215-677-0380

6801 Ridge Ave., 19128
 215-483-6633

330 W Oregon Ave - 19148
 215-467-6000

PEDIATRIC DENTAL ASSOCIATES

6404 E. Roosevelt Blvd., 19149
 215-743-3700

2301 E. Allegheny Ave., 19134
 215-282-8000

3509 N. Broad St., 19140
 - within Temple Hospital,
 Boyer Pavilion, 6th Floor
 215-707-6411

DENTAL DREAMS

2107-B Cottman Ave., 19149
 215-235-4060

5675 N. Front St., 19120
 215-224-0440

2459 Aramingo Ave., 19125
 215-427-2800

KIDS SMILES

5828 Market St., 19139
 Entrance B
 215-747-6901

2821 Island Ave., 19153
 Suite 210
 215-492-9291

DOUGLAS R. RECH, DMD

7122 Rising Sun Ave., 19111
 215-725-8300

job 08/2015 rev.