

**PRE-KINDERGARTEN ELIGIBILITY**

**Burton Elementary School**

**2023 - 2024**

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

**SECTION A**

YES NO Will your child be three or four years of age on or before September 1, 2023?

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**SECTION B**

YES NO Is the student unable to speak and comprehend the English language?  
YES NO Is the student currently enrolled in a Head Start Program (HSP)?  
YES NO Is the student homeless, as defined by 42 U.S.C Section 1143a?  
YES NO Is the student a child of an active duty member of the armed forces of the United States, including the state military forces or a reserve component of the armed forces, who is ordered to active duty by proper authority?  
YES NO Is the student a child of a member of the armed forces of the United States, including the state military forces or a reserve component of the armed forces, who was injured or killed while serving on active duty?  
YES NO Has the student ever been in the conservatorship of the Department of Family and Protective Services (foster care) following an adversary hearing?  
YES NO Has the student been in foster care in another state or territory, if the child resides in this state?  
YES NO Is the student a child of a person eligible for the Star of Texas Award as: a peace officer under Section 3106.002, Government Code; a firefighter under Section 3106.003, Government Code; or an emergency medical first responder under Section 3106.004, Government Code?

Your child could also qualify as educationally disadvantaged. We will determine educationally disadvantaged eligibility based on Section C and D.

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**SECTION C**

YES NO Do you receive Supplemental Nutrition Assistance (SNAP)? # \_\_\_\_\_  
YES NO Do you receive Temporary Assistance to Needy Families (TANF)? # \_\_\_\_\_

Documentation required such as current SNAP and TANF letters.

**If you answered YES to either of these questions, skip section D. Continue to section E.**

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**SECTION D**

How many members are in the household (including all adults and children)? \_\_\_\_\_

What is the TOTAL YEARLY INCOME BEFORE DEDUCTIONS OF **ALL** HOUSEHOLD MEMBERS? \_\_\_\_\_

*Documentation required such as paycheck stubs (current, last 30 days), tax returns, etc.*

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**SECTION E**

YES NO If my child does not meet any of the above criteria, I agree to pay the tuition rate of \$375 per month.

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I certify that the information provided is true and correct and that all income is reported. I understand that school officials may verify the information on the application and that deliberate misrepresentation of the information may subject me to prosecution under applicable state law. Furthermore, I recognize that any falsification of records or omission of information may prevent Burton ISD from providing services for my child.

\_\_\_\_\_  
Parent/Guardian Name (Print)

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

\_\_\_\_\_  
Date

Office Use Only:

\_\_\_\_\_ Direct Certification

\_\_\_\_\_ Reduced

\_\_\_\_\_ Free

\_\_\_\_\_ Tuition