



GARDEN GROVE UNIFIED SCHOOL DISTRICT
 Office of Elementary Education
Clinton Corner Family Campus
 State Preschool Program
 13581 Clinton St. Garden Grove, CA 92843
 Tel: (714) 663-6298 Fax: (714) 663-6149

Office Use Only

Pre-Certification Interest Form 2019-2020

**Note: This is a preliminary application. It does not guarantee your child's placement in the program.
Please fill out sections A, B and C**

Section A

Student Name _____ **Student D.O.B** _____ M F
Last Name First Name Middle Name

Home Address _____ **City** _____ **Zip** _____ - _____
+ 4 digits

Child lives with : Both Parents Mother Only Father Only Legal Guardian Foster Parent

Mother/ Guardian : _____
Last Name First Name Middle Name

Cell Phone () _____ Home Phone () _____ Email _____

Father/ Guardian: _____
Last Name First Name Middle Name

Cell Phone () _____ Home Phone () _____ Email _____

Section B List all <u>YOUR</u> children under 18 years of age living in your home:				
	Last Name	First Name	Birth Date	Current School
1				
2				
3				
4				
5				

Section C Current source of GROSS INCOME: (Monthly income before taxes & deductions)	
Mother's Gross Income: Total monthly wages (gross) : _____ How often are you paid? _____ Paycheck <input type="checkbox"/> Cash <input type="checkbox"/> Do you receive other financial assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No	Father's Gross Income: Total monthly wages (gross): _____ How often are you paid? _____ Paycheck <input type="checkbox"/> Cash <input type="checkbox"/> Do you receive other financial assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No

Parent/ Guardian Signature _____ **Date:** _____ **Total Gross Amount: \$** _____

<p>Office Use Only: <input type="checkbox"/> 3 yr Old Prog. <input type="checkbox"/> 4 Yr. Old Prog.</p> <p>Fam. Size: _____ Fam. ID #: _____</p> <p>Rank: _____ Over Income: _____ %</p> <p>Home School: _____ <input type="checkbox"/> Out of Dist.</p> <p>Reg. Packet Given on: _____/_____/_____</p> <p><input type="checkbox"/> SharePoint _____ <input type="checkbox"/> EIP</p>	<p>Notes:</p>
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