EDUCATION *Please select only ONE (1) option*

☐ **My child has never attended Pre-K,** daycare, a childcare program, or a family childcare home.

☐ In the past, my child attended Pre-K, daycare, a childcare program, or a childcare home but is not attending now. **Now my child stays with family member or a babysitter.**

☐ **My child is currently attending a childcare program or family childcare home.**

Name of current Site/School/Family Child Care Home:

Address: | **Apartment or Unit Number**

City: | **State:** | **Zip Code:**

Please select only ONE (1) option

☐ I understand that placement is NOT GUARANTEED, however, if eligible, **I would like my child to remain at the same childcare center where they are currently attending.**

☐ I understand that placement is NOT GUARANTEED, however, if eligible, **I would like my child to be considered for ALL programs for which they are eligible** - Head Start, Wake County Smart Start, and Wake County Public Schools.

Additional Information:

Does your child receive a Child Care Subsidy Voucher?: **Yes** ☐ **No** ☐

FOR DATA PURPOSES ONLY - Would your child require transportation while attending Wake Pre-K?
☐ **Yes** ☐ **No**

Please note that Transportation is responsibility of the parents/legal guardians.

How did you hear about this program? (Select all that apply)

Social Media/News

- ☐ Internet Search
- ☐ Facebook/Instagram
- ☐ TV Ad
- ☐ Flyer
- ☐ Radio

Community

- ☐Family/Friends/Neighbor
- ☐Sibling/Family attended Pre-K or Wake ThreeSchool
- ☐Church
- ☐Doctor/Pediatrician
- ☐Community Event

Organization/Program

- ☐Childcare Center
- ☐Wake County Smart Start
- ☐Telamon Head Start
- ☐Wake County Public Schools
- ☐Other