



State of Rhode Island and Providence Plantations
DEPARTMENT OF EDUCATION
Shepard Building
255 Westminster Street
Providence, Rhode Island 02903-3400

Deborah A. Gist
Commissioner

**Rhode Island Pre-Kindergarten Program
2015-2016 Application**
(Accepted until June 1, 2015)

The RI Pre-K Program is accepting applications from families with four year olds living in one of nine eligible communities, including Central Falls, Cranston, East Providence, Newport, Pawtucket, Providence, Warwick, West Warwick, and Woonsocket. To find out more information about the RI Pre-K Program, please visit the [RIDE Pre-K Programs Website](#).

The 2015 – 2016 RI Pre-Kindergarten Program sites are:

In Central Falls:

**Central Falls School District
Captain Hunt School (3 classrooms)**
12 Kendall Street
Central Falls, RI 02863
727-7720 (applications available at Ella Risk
Elementary School, 949 Dexter Street)

In Cranston:

**Comprehensive Community Action Program
(CCAP)**
848 Atwood Avenue
Cranston, Rhode Island 02920
943-4060

In East Providence:

East Bay Community Action Program
70 Turner Avenue
Riverside, RI 02915
649-4233

In Newport:

**East Bay Community Action
Program (two classrooms)**
8 John H. Chafee Blvd.
Newport, RI 02840
367-2001

In Pawtucket:

**Ready to Learn/Heritage Park YMCA Early
Learning Center (two classrooms)**
333 Roosevelt Avenue
Pawtucket, RI 02860
727-7050

**East Bay Community Action Program at the
Pell Annex of the John F. Kennedy School –
temporary location; program will be for Newport
residents only)**
40 West Main Rd.
Middletown, RI 02842
367-2001 (applications available at EBCAP
Head Start, 8 John Chafee Blvd)

In Providence:

Beautiful Beginnings (two classrooms)

700 Elmwood Avenue
Providence, Rhode Island 02907
785-8485

Children's Friend and Service

99 Berkshire Street
Providence, RI 02908
752-7500

Children's Friend and Service

350 Point Street
Providence, RI 02903
752-7600

Ready to Learn Providence @ CCRI Liston Campus

1 Hilton Street
Providence, Rhode Island 02905
490-9960 (Applications available at
945 Westminster Street, Providence)

Meeting Street (two classrooms)

1000 Eddy Street
Providence, RI 02905
533-9100

The Mariposa Center Pre-K

One Corliss Avenue
Providence, RI 02905
228-8702 (Applications available at 550 Branch
Ave, Providence)

Smith Hill Early Childhood Learning Center (three classrooms)

25 Danforth Street
Providence, RI 02908
455-3890

In Warwick:

CHILD, Inc.

160 Draper Avenue
Warwick, Rhode Island 02888
732-5200

Imagine Preschool

400 East Avenue
Warwick, Rhode Island 02888
825-1152

In West Warwick:

CHILD, Inc. (three classrooms)

28 Payan Street
West Warwick, RI 02889
828-2888

In Woonsocket:

Woonsocket Head Start Child Development Association (four classrooms)

204 Warwick St.
Woonsocket, RI 02895
769-1850

Connecting for Children and Families Child Care Center

46 Hope Street
Woonsocket, RI 02895
766-3384

To be eligible for enrollment, children must:

- turn 4 years of age by September 1, 2015; and
- live in the community in which the Pre-K program is located.

PLEASE NOTE: A copy of birth certificate, proof of residency, and family total income will be required upon enrollment. Family total income must be verified to match what is reported in this application in order for child enrollment to be completed.

Children will be selected for enrollment through a state-supervised lottery. Each classroom will enroll 18 children. Children will be assigned to classrooms in their community of residence.

Completed applications should be returned to the program of choice. Please *do not* submit applications to the Department of Education.

Parents may apply at more than one site if multiple sites exist in the community of residence, but only one application per site will be accepted. Applications will be accepted until June 1, 2015. If selected during the lottery, enrollment will be offered for that site only.

Questions? Contact Franklin Brito at franklin.brito@ride.ri.gov or 222-8184

**Rhode Island Pre-Kindergarten Program
2015-16 APPLICATION**

(By June 1st deliver this application to the Pre-K program of your choice)

CHILD'S FULL NAME:

Last Name: _____

First Name: _____

Middle Name: _____

SEX: Male Female

DATE OF BIRTH: _____

CHILD'S HOME ADDRESS:

Street Address/Apt. # _____

City, State, Zip _____

TELEPHONE: _____ - _____ - _____

PARENT/PERSON ACTING AS PARENT APPLYING FOR CHILD:

Parent #1

Last Name: _____

First Name: _____

Street Address/Apt. # _____

City, State, Zip _____

Telephone: _____ - _____ - _____ **EMAIL:** _____

Parent #2

Last Name: _____

First Name: _____

Street Address/Apt. # _____

City, State, Zip _____

TELEPHONE: _____ - _____ - _____ **EMAIL:** _____

HOUSEHOLD INCOME:

What is the number of people in your household? _____

What is your monthly household income? Check a circle below. This information will be verified if enrolled.

- \$2,456 or below \$2,456.01 - \$3,098 \$3,098.01 - \$3,739
- \$3,739.01 - \$4,380 \$4,380.01 - \$5,022 \$5,022.01 - \$5,663
- \$5,663.01 - \$6,304 \$6,304.01 - \$6,651 \$6,651.01 to \$6,998
- \$6,998.01 or above

Please check the boxes and sign below to document that you have read and understand the following statements:

I attest that the information provided above is correct and I understand that filing documents containing false information with the government is illegal. (RIGL 11-18-1).

I understand that my family total income must be verified to match what is reported in this application in order for child enrollment to be completed.

I understand that if my child is chosen for the state Pre-K program, I am responsible for providing regular transportation to and from the program which ensures my child's attendance each day. If my child is absent for unexcused reasons (including family vacations) for 20 or more school days, I understand that my child will likely lose their slot in the state Pre-K program and it will be given to the next child on the state Pre-K enrollment list.

I confirm that I can be reached at the phone numbers/emails listed in this application from June 1 – 12, 2015 if my child is chosen in the state lottery to participate in the state Pre-K program.

Parent or Guardian
Signature _____

Date _____