

Sault Sainte Marie Tribe of Chippewa Indians Early Childhood Education Programs 4 Ice Circle Drive Sault Sainte Marie, MI 49783 Phone 906-635-7722 or Fax 906-635-4779



Head Start serves low-income families, pregnant women and children with disabilities who meet federal guidelines.

Program options please mark all that apply:

Head Start: 3-5yrs. old Sault: Extended Day/Part Sault: Full Day/Full Year St. Ignace: Extended Day/I		Early Head Start: Sault: Full Day/ Full Year 0-3
Child's Name	Dat	e of Birth/Sex
RacePrimary lan	guage	
Address	City	Zip
Home Phone	Cell Phone	Work Phone
		Birthdate//Race Birthdate//Race
Email Address		
Please indicate any services y DHS Child Care Assistance	-	Sault Tribe CCDF child care
□DHS Cash Assistance (FIP)		saun Tribe CCDF child care
□Food Assistance (SNAP)	\Box N	Medicaid #
DHS Case #		VIC
Please indicate if child (docur	nentation needed):	
□has a Diagnosed Disability	☐ is a Foster Child	☐ is Homeless (signed form)
Family: Please check:		
Two Parent Family	Number of adults (18 or older) in family	
☐One Parent Family	Number of children (under 18) in family	
☐ Foster Family		<u>, </u>
Family Income Monthly Amo	ount:	
☐ No-Income (signed form)		
Mother's Work\$	Social Security\$	Unemployment\$
Father's work \$	Public Assistance\$	SSI\$
Child Support \$	Other forms of cash	assistance \$
Total Monthly Income (gross) \$	

Please indicate any issues which have occurred with this child or immediate family:

☐ Current Head Start/EHS/C	CC Ciliu	Current Concerns:
☐ Sibling of Currently Enrolled Child		☐ Home Safety Concerns (lead)
Developmental Concerns		☐ Homes Safety Concerns (fire)
☐ Developmental Delays		☐ Other Home Safety Concerns
☐ Nutritionally Deficient		☐ Substance Abuse/Addiction (drugs/alcohol)
☐ Speech & Language Concern	IS	☐ Housing in Rural Area
☐ Child has long term Chronic	Illness	☐ Lack of Stable Housing
C .		☐ Lack of Health Care
Household		☐ Long-term chronic illness-immediate family
☐ One Parent		☐ Large # People living in household
☐ Parent's divorced		☐ Lack of child care
☐ Parent Serving Military or Veteran		Hours of care neededto
☐ Parent Serving Active War Time Duty		Historical Concerns-immediate family
☐ Parent Incarcerated/Disabled		☐ History of Neglect
☐ Parent/Guardian/Sibling Loss by Death		☐ History of Physical Abuse
☐ Teen Parent		☐ History of Sexual Abuse
		☐ History of Domestic Violence
Early Head Start Only		☐ History of Substance Abuse/Addiction
Mother:	Child:	(drug and/or alcohol problems)
☐ Pregnant Teen	☐ Low Birth Weight	☐ History of High School drop out
☐ No Prenatal Care	☐ Premature Birth	☐ History diagnosed family problems
☐ Prenatal Complications		☐ Family History of Destructive/Violent temper
☐ Multiple Birth anticipated		
☐ Currently pregnant over 35 y	rs old	
If parents are attending school	l, please indicate wher	e and attach a copy your current schedule:
Name of college/school	Course of study	Full time/ Part time
-		Full time/ Part time
How did you hear about our p	orogram?	
How did you hear about our p Current/Past Head Start Parent_	orogram? Web site	Mail Newspaper
How did you hear about our p Current/Past Head Start Parent_ Friend/Family Co	orogram? Web site mmunity Event	Mail Newspaper Other
How did you hear about our p Current/Past Head Start Parent_ Friend/Family Co	orogram? Web site mmunity Event	Mail Newspaper Other
How did you hear about our parent/Past Head Start Parent_Friend/Family Co	orogram? Web site mmunity Event Enrollee's or Pare	Mail Newspaper Other ent's Tribal Identification
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be su	orogram? Web site mmunity Event Enrollee's or Pare	Mail Newspaper Other
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments:	orogram? Web site mmunity Event Enrollee's or Pare bmitted in order	Mail Newspaper Other ent's Tribal Identification to process this application.
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be su Acknowledgments: Please be advised the in	web siteweb sitewhen the siteweb sitewhen the siteweb sitewebsite the site site site site site site site sit	MailNewspaperOther ent's Tribal Identification to process this application. ent does not automatically qualify your child for
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interprollment in the Sault Tribe House	web siteweb sitewhen the siteweb sitewhen the siteweb sitewebsite the site site site site site site site sit	Mail Newspaper Other ent's Tribal Identification to process this application.
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation of the Sault Tribe Heavel and the Sault Tribe	program? Web site mmunity Event Enrollee's or Pare bmitted in order formation in this documed Start/Early Head Start	MailNewspaperOther ent's Tribal Identification to process this application. Hent does not automatically qualify your child for art Program. This application form is for
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sufficient and the Sault Tribe Heave all attention purposes only. I certify the information	web site Web site mmunity Event Enrollee's or Pare bubmitted in order aformation in this document of the start/Early Head Start provided is accurate an accurate	MailNewspaperOther ent's Tribal Identification to process this application. ent does not automatically qualify your child for art Program. This application form is for ad truthful to the best of my knowledge. I
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation purposes only. I certify the information understand enrollment is not ba	mmunity Event Enrollee's or Pare builted in order aformation in this docume ad Start/Early Head Start a provided is accurate ar sed on a first come first	MailNewspaperOther ent's Tribal Identification to process this application. ment does not automatically qualify your child for art Program. This application form is for and truthful to the best of my knowledge. I served basis, but is based on the highest need. I
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation purposes only. I certify the information understand enrollment is not ba	mmunity Event Enrollee's or Pare builted in order aformation in this docume ad Start/Early Head Start a provided is accurate ar sed on a first come first	MailNewspaperOther ent's Tribal Identification to process this application. ent does not automatically qualify your child for art Program. This application form is for ad truthful to the best of my knowledge. I
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation purposes only. I certify the information understand enrollment is not baunderstand I will be required to	mmunity Event Enrollee's or Pare bmitted in order aformation in this document and a sed on a first come first provide further document.	MailNewspaper Other ent's Tribal Identification to process this application. The process this application of the process this application form is for the program. This application form is for the desired truthful to the best of my knowledge. I served basis, but is based on the highest need. I tentation prior to enrollment to confirm eligibility.
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation purposes only. I certify the information understand enrollment is not ba	mmunity Event Enrollee's or Pare bmitted in order aformation in this document of the provided is accurate an accurate ar sed on a first come first provide further document.	MailNewspaper Other ent's Tribal Identification to process this application. The process this application of the process this application of the program. This application form is for the distribution of the best of my knowledge. I served basis, but is based on the highest need. I entation prior to enrollment to confirm eligibility.
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Acknowledgments: Please be advised the interpretation purposes only. I certify the information understand enrollment is not baunderstand I will be required to	mmunity Event Enrollee's or Pare bmitted in order aformation in this document of the provided is accurate an accurate ar sed on a first come first provide further document.	MailNewspaper Other ent's Tribal Identification to process this application. The process this application of the process this application form is for the program. This application form is for the desired truthful to the best of my knowledge. I served basis, but is based on the highest need. I tentation prior to enrollment to confirm eligibility.
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Must be sure advised the irrenrollment in the Sault Tribe Heavaluation purposes only. I certify the information understand enrollment is not baunderstand I will be required to Date:	Enrollee's or Pare both the community Event Enrollee's or Pare both the community Enrollee's Enrollee's or Pare both the community Enrollee's Enr	MailNewspaperOther ent's Tribal Identification to process this application. ment does not automatically qualify your child for art Program. This application form is for and truthful to the best of my knowledge. I served basis, but is based on the highest need. I entation prior to enrollment to confirm eligibility. marent/Guardian or Enrollee Wise Only
How did you hear about our part Current/Past Head Start Parent_Friend/FamilyCo A Copy of MUST be sure Acknowledgments: Please be advised the interpolation purposes only. I certify the information understand enrollment is not base understand I will be required to Date: Date Application Received:	mmunity Event Enrollee's or Pare bmitted in order aformation in this docume ead Start/Early Head Start provided is accurate ar sed on a first come first provide further docume X Signature of Pare Program U	MailNewspaperOther ent's Tribal Identification to process this application. The process this application of the process this application form is for the program. This application form is for the distribution of the best of my knowledge. It is served basis, but is based on the highest need. It is entation prior to enrollment to confirm eligibility. The process this application form is for the process of the highest need. It is entation prior to enrollment to confirm eligibility. The process this application form is for the process of the process
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Must be sure advised the irrenrollment in the Sault Tribe Heavaluation purposes only. I certify the information understand enrollment is not baunderstand I will be required to Date:	mmunity Event Enrollee's or Pare bmitted in order aformation in this docume ead Start/Early Head Start provided is accurate ar sed on a first come first provide further docume X Signature of Pare Program U	MailNewspaperOther ent's Tribal Identification to process this application. ment does not automatically qualify your child for art Program. This application form is for and truthful to the best of my knowledge. I served basis, but is based on the highest need. I entation prior to enrollment to confirm eligibility. marent/Guardian or Enrollee Wise Only
How did you hear about our part Current/Past Head Start Parent_Friend/Family Co A Copy of MUST be sure Must be sure advised the irrenrollment in the Sault Tribe Heavaluation purposes only. I certify the information understand enrollment is not baunderstand I will be required to Date: Date Application Received: Proof of Income Proof of Tribal Identification	Enrollee's or Pare benefit and the start/Early Head Start provided is accurate an sed on a first come first provide further document and the start provided is accurate an sed on a first come first provide further document and the start provided further	MailNewspaperOther ent's Tribal Identification to process this application. The process this application of the program. This application form is for the program of the
How did you hear about our part Current/Past Head Start Parent_Friend/FamilyCo A Copy of MUST be sure Must be sure advised the interpretation purposes only. I certify the information understand enrollment is not baunderstand I will be required to Date: Date Application Received: Proof of Income	Enrollee's or Pare benefit and the start/Early Head Start provided is accurate an sed on a first come first provide further document and the start provided is accurate an sed on a first come first provide further document and the start provided further	MailNewspaperOther ent's Tribal Identification to process this application. The process this application of the process this application form is for the program. This application form is for the program. This application form is for the program. This application form is for the program of the p