



Leap Ahead 2017

Summer Kindergarten Readiness Program

Program Information and Requirements

Leap Ahead is a 9-week Kindergarten Readiness Program focused on preparing children and their families for the kindergarten classroom. Leap Ahead will concentrate on kindergarten expectations, building social and emotional competency, strengthening language and literacy proficiency and will reinforce other academic and developmental areas. The program includes parent participation in classroom, home and community parent/child activities. Parents will be provided information, training and access to community resources in order to support their child and entire family.

Scholarships funded by the City of Seattle Families and Education Levy are available. To qualify, children should have had little or no previous preschool experience or be in need of additional support to be ready for kindergarten. Families applying for scholarships must submit documentation of household income demonstrating financial need.

Our goal is to ensure a positive transition to kindergarten and build a strong foundation for the future.

Program Requirements:

Child:

- Must be able to fully participate in the program, including field trips, community projects, individual, small, and large group activities, etc.
- Launch will make reasonable accommodations for children with diagnosed Special Needs, within the limitations that their IEP goals/restrictions can be integrated into the Leap Ahead curriculum and that the child can receive measurable benefits from the 9-week program.
- Children must attend all scheduled program days.

Parent/Family:

- Will commit to the entire 9-week program. Up to 5 days are allowed for preplanned or excused absences.
- Will fully participate in Leap Ahead scheduled activities, including Leap Ahead orientation, Parent-Teacher Conference (if needed), end of the program celebration, and at least 1 parent education forum.
- Work with child on activities at home to support learning.
- Drop-off and pick-up on time for self-transportation.
- Authorize participation by your child in the "Jump Start" program if your child will be attending the host school. "Jump Start" happens the week of August 21-25, from 9-12 noon each day with Seattle Public Schools' staff.
- Assist program staff in the transfer of child information to the kindergarten placement.

Learn. Grow. Inspire.





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Application Instructions

*Priority will be given to applications submitted by **Monday, May 1, 2017**. Should the number of applications submitted by the deadline exceed the number of spaces available, applications will be prioritized based on the school child will be attending for kindergarten and the number of weeks the child will be attending Leap Ahead.

Please include the following documents to complete your child's Application:

1. Program Application / Scholarship Application	ALL applicants must review and complete sections I through VI of the Program Application Form. Legal parent/guardian must sign and date. If applying for a scholarship, Section VII must also be completed.
2. Preschool Provider Input Form	If your child has attended or is attending a preschool other than Launch, the Preschool Provider Input Form (see next page) is also required. Please complete and sign the top section of the Preschool Provider Input Form and ask your child's current or former preschool provider to complete the rest of the form. The Preschool Provider Input Form is not required for students who have never attended preschool or for those who are currently attending Launch preschool.
3. Scholarship Documents (required for Scholarship Applicants only)	<p>a. Proof of Residency - Any one of the following including parent name and address: Utility bill (gas, electricity, water, garbage), mortgage documents/homeowners insurance, OR 2 current documents showing same name and address: Driver's License, paycheck stubs, medical/dental insurance information, government documents (IRS, property tax) Lease Agreement, Business mail (bank statements, bills as cable, cell, medical)</p> <p>b. 2016 W-2's – for all wage earners in the household</p> <p>c. 2 most recent paystubs - for all wage earners in the household</p>
4. Registration Fee	\$50 registration fee (not required if your child is currently attending Launch and has already paid a registration fee this school year). Scholarship applicants may submit their application without the registration fee.
5. Complete Individual Education Plan (IEP) – If Applicable	If your child has an IEP, the complete IEP must accompany the Application. Per ADA, Launch will make reasonable accommodations for children with diagnosed Special Needs, within the limitations that their IEP goals/restrictions can be integrated into the Leap Ahead curriculum.

WITHOUT THE ABOVE LISTED DOCUMENTS, YOUR APPLICATION IS INCOMPLETE AND CANNOT BE PROCESSED.

APPLICATIONS ARE DUE BY MONDAY, MAY 1, 2017

PLACEMENT WILL BE COMPLETED AND FAMILIES NOTIFIED BY FRIDAY, MAY 12, 2017

Please note... If your child has a medical/physical condition that requires special accommodation, Launch will require additional information and a **Classroom Accommodation Plan** before your child begins classroom services. This includes written instructions from your Medical Provider, the required medication AND a meeting with program staff.

Please return your application to: Launch, 5950 6th Ave S, Suite 109, Seattle, Washington 98108

For information call: (206) 726-7972 or email Darline.Guerrero@launchlearning.org



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Priority Enrollment Deadline May 1, 2017

Section I: Registration Form: (to be completed by ALL applicants)

Please select site (indicate first and second choice):

- | | | |
|---|---|--|
| <input type="checkbox"/> Beacon Hill 2025 14 th Ave S. | <input type="checkbox"/> Kimball 3200 23 rd Ave S. | <input type="checkbox"/> Maple 4925 Corson Ave S. |
| <input type="checkbox"/> Hawthorne 4100 39 th Ave S. | <input type="checkbox"/> Leschi 135 32 nd Ave | <input type="checkbox"/> Montlake 2409 22 nd Ave E. |
| <input type="checkbox"/> Highland Park 1012 SW Trenton | <input type="checkbox"/> Madrona 1121 33 rd Ave | <input type="checkbox"/> Sanislo 1812 SW Myrtle |

Rates and dates are subject to change, and are partly dependent on Seattle Public School's schedule.

Please select 2017 Summer Program: Leap Ahead Students must select at least 8 weeks

Summer Week			1*	2	3	4	5	6	7	8	9*
			7/5-7/7	7/10-7/14	7/17-7/21	7/24-7/28	7/31-8/4	8/7-8/11	8/14-8/18	8/21-8/25	8/28-8/31
Schedule A	\$230 / week	7AM-6PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule B	\$200 / week	9AM-4PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***Launch will be closed July 3, July 4, and Sep. 1. Week 1 tuition=\$138/\$120. Week 9 tuition=\$184/\$160**

How did you hear about Launch?

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Returning Launch family | <input type="checkbox"/> Roadside Banner | <input type="checkbox"/> Post card/Flyer mailed to my home | <input type="checkbox"/> Internet/ Website |
| <input type="checkbox"/> Flyer came home from school with my child | <input type="checkbox"/> Launch Employee | <input type="checkbox"/> Launch Family | |
| <input type="checkbox"/> Community event/fair | <input type="checkbox"/> Magazine | <input type="checkbox"/> Other _____ | |

- An annual, non-refundable registration fee of \$50 is required to register each child and **is due with this registration form**. If you are applying for a scholarship you do not need to submit a registration fee.
- Full tuition/co-pay and proof of any subsidy coverage is due prior to starting the program.
- A separate Enrollment Packet is required for each child and must be completed and turned in to your Program Director prior to starting the program.
- Launch welcomes and supports families of all races, national origins, religious beliefs, sexual orientations, genders, or abilities.
- Enrollment is on a first-come first-served basis. If a specific site is full, please consider an alternate Launch location, or you may ask to be put on the waiting list.
- Launch accepts City of Seattle and Washington State Department of Social and Health Services (DSHS) child care subsidies.
- **Summer early bird registrations made by April 17th are non-refundable and may not be applied to other weeks.**

Child's Name: _____ Grade (as of Fall 2017): _____

School Child will attend in Fall 2017: _____ Child's Age: _____ Date of Birth: _____

Parent/Guardian Name: _____ Cell phone: _____

Mailing Address: _____ Work phone: _____

E-mail address: _____ Home phone: _____

Parent Signature: _____ Date: _____

A separate registration form and fee is required for each child in a family. Thank you for registering at Launch!
 Please return registration form and \$50 registration fee to your Program Director
 Or mail to: Launch 5950 6th Ave. S, Suite 109, Seattle, WA 98108



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Priority Enrollment Deadline: May 1, 2017

Section II: Child Information: (to be completed by ALL applicants)

Last Name:	First Name:	Middle Name:	Date of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Residence Address:		City:	State:	Zip:
Mailing Address:		City:	State:	Zip:
Phone:	Cell:	Work/Message:		Other:
Does this child have a diagnosed disability? If YES, information MUST accompany Application		<input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please specify:	
Does this child have an Individual Education Plan (IEP)? If YES, the COMPLETE IEP MUST accompany Application		<input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, School District/ID Number:	
Do you have a developmental, behavioral, nutritional, or physical concern about this child?		<input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please specify:	

Section III: Transportation: (to be completed by ALL applicants)

Transportation: Launch requires self-transportation at all sites.

Can you or a relative friend neighbor Other _____ transport your child to school? YES NO

Placement will only be given to families who are able to provide their own transportation.

Section IV: Participation Commitment – Family Engagement (to be completed by ALL applicants)

Parent Engagement Commitment: Leap Ahead is a partnership between Launch, school and family. Parents/guardians agree to support your child's education by contributing as a volunteer in the Leap Ahead program. This time may be contributed weekly or monthly in the classroom, or accrued during one event such as helping with a family engagement event, fieldtrip, parent education forum, orientation, or attending a school event.

Please indicate your preferred time of day for family engagement activities and your availability to join the program:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

Parent Engagement: We encourage families to participate in our programs. If you are available and interested in participating in the classroom, please indicate which areas:

<input type="checkbox"/> Artwork	<input type="checkbox"/> Games	<input type="checkbox"/> Reading/Storytelling	<input type="checkbox"/> Translation
<input type="checkbox"/> Cooking	<input type="checkbox"/> Activity Planning	<input type="checkbox"/> Music/Dancing	<input type="checkbox"/> Field Trips
<input type="checkbox"/> Classroom Support	<input type="checkbox"/> Other: Describe:		

Parent/Teacher Communication – Conferences can be scheduled as needed on Friday afternoons or at other times convenient for parents' schedules. Communication between parents and teachers/director is essential to effective partnership.

What is the best way to contact you? Telephone Mail – via classroom staff E-mail



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Section V: Participation Commitment – Attendance (applies to ALL applicants)

Attendance: Our Leap Ahead Program places emphasis on attendance because we know success in school begins with a child attending consistently. Your cooperation in having your child attend Leap Ahead each day is very important. Regular attendance is needed for children and families to gain the full benefits of being in the Leap Ahead program. Your child is expected to attend at least 8 weeks if on a scholarship and for enrollment priority. The teacher must be notified by telephone, email, or through a written note when your child is absent. Unexcused absences will be followed up with a call from the teacher or director. The teacher/director and family will work together to overcome obstacles that are preventing the child from attending Leap Ahead consistently. If the child's absence continues, a letter will be sent home explaining the attendance policy and giving the options of continuing involvement in the program.

Each family will be given 5 days (1 week) for preplanned (example: vacation) or excused absences (examples: illness, emergency family situation). If chronic absenteeism occurs, your child may lose their space and their slot may be given to another child. You will have the option to be placed back on the waiting list. Frequent absences due to illness will be reviewed by Launch staff and we will ask the family to participate in developing an attendance plan.

Section VI: Preschool Experience: (to be completed by ALL applicants)

Child's Name: _____ Birth Date _____

Priority for enrollment will be given to children with limited or no previous preschool experience. Children with preschool experience may be given enrollment priority with documentation from their current preschool indicating the need for additional support services prior to starting Kindergarten.

1. Does your child currently attend preschool at Launch?
 YES – no additional information is needed in Section VI
 NO – please continue to Question 2

2. Has your child ever attended a preschool?
 NO – no additional information is needed in Section VI
 YES – please continue to Question 3 **AND ask the provider you name in #3 to complete the Leap Ahead Preschool Provider Input Form included with this packet**

3. Please provide the following information about the preschool your child is currently attending. If your child is not currently attending preschool but did attend in the past please provide the information about the preschool he or she most recently attended.
:
a. Name of preschool _____
b. Date your child started _____ End date (if no longer attending) _____
c. Preschool Address _____
d. Best person at the preschool to contact about your child's preschool experience _____
e. Phone number of contact person at preschool _____
f. Email address of contact person at preschool _____



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Section VII: Scholarship Request (to be completed ONLY if requesting a scholarship)

Do you have another child who attended or attends Launch preschool or school-age program?

NO YES

If YES, child(ren) name(s): -

Number living in household: _____

Number Adults: _____

Number of children under 18: _____

Yearly Household Income _____

If applying for a scholarship, please attach copies of 2016 W-2's and the two most recent paystubs for all wage earners in your household, and proof of residency within the Seattle city limits (please see application instructions for more information about proof of residency.)

To the best of my knowledge, the information in this application is factual and true. I understand the requirements of the program and agree to the participation commitments in sections IV and V.

Parent/Legal Guardian Signature

Print Name

Date

If your child has attended or is attending a preschool other than Launch, the Preschool Provider Input Form (see next page) is also required. Please complete and sign the top section of the Preschool Provider Input Form and ask your child's current or former preschool provider to complete the rest of the form. The Preschool Provider Input Form is not required for students who have never attended preschool or for those who are currently attending Launch preschool.



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Preschool Provider Input Form

This form must be completed for ALL applicants who attend a preschool other than Launch. This form is not required if your child has never attended preschool or if he or she is currently attending a Launch preschool.

Preschool _____ Child's Name: _____

I give permission for staff from the above named preschool to release information about my child's development to Launch for purposes of preparing for the Leap Ahead summer kindergarten readiness program:

Parent Signature _____ Date: _____

Dear Preschool Teacher or Director –

Launch's Leap Ahead program is a summer kindergarten readiness program. The child named above is applying to participate in Leap Ahead this summer. We would appreciate your help in better understanding this child's development to assure we meet his/her needs this summer.

Please complete and sign this form, and **return it to the child's family OR you can send it directly to us at the email listed below or via U.S. mail to Launch, 5950 6th Ave. S, Suite 109, Seattle, WA 98108.**

Thank you in advance for your help. If you have any questions please don't hesitate to contact us at 206-726-7972 or by email to darline.guerrero@launchlearning.org

Name (please print) of Preschool Teacher or Director Completing this Form _____

Signature of Teacher or Director _____ Date _____

1. Do you use Teaching Strategies Gold ("TSG") to assess children's development?

NO – please continue to Question 2 on reverse side

YES – please answer questions 1a through 1d:

1a. When was the most recent TSG assessment completed on the child named above?

1b. For each TSG domain listed below, please indicate whether or not the child was meeting age appropriate expectations as of the most recent TSG assessment:

Cognitive	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Language	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Physical	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Social-Emotional	<input type="checkbox"/> YES	<input type="checkbox"/> NO

1c. Are there any other factors that may put the child at risk for slipping below age appropriate expectations this summer due to summer learning loss?

English Language Learner
 IEP
 Transitional Housing
 Other (please specify) _____

1d. Comments, if any:



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Preschool Provider Input Form

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2. If you do not use Teaching Strategies Gold, do you use another formal assessment tool?

- NO – please continue to Question 3
 YES – please answer the following:

2a. If so, which one?

2b. When was the most recent assessment of the child completed?

2c. Based on the most recent assessment, was the child meeting age appropriate expectations in these areas?

- | | | |
|------------------|------------------------------|-----------------------------|
| Cognitive | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Language | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Physical | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Social-Emotional | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

2d. If the child is meeting age appropriate expectations in all areas listed above, are there any other factors that may put the child at risk for slipping below age appropriate expectations this summer due to summer learning loss?

- English Language Learner
 IEP
 Transitional Housing
 Other (please specify) _____

3. If you do not use a formal assessment tool, please answer the following questions based on your professional judgment as an educator

3a. Do you feel this child will need additional support during summer 2017 to be ready for kindergarten?

- YES NO

3b. In which areas will the child need support? (Please check all that apply):

- | | | |
|------------------|------------------------------|-----------------------------|
| Cognitive | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Language | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Physical | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Social-Emotional | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

3c. Please explain any yes answers. Your input will help us better support the child this summer.

Thank you for your help. Please return this form to the child's family or to Launch, 5950 6th Ave. S, Suite 109, Seattle, WA 98108 or by email to darline.guerrero@launchlearning.org