

2011 Hillsborough Summer

VPK



General Program & Eligibility Info
PAGES 1-2



2011 Summer VPK Program Locations & Where to Enroll
PAGES 4



VPK Child Application
PAGE 5

All About Summer VPK

WHAT IS THE SUMMER VPK PROGRAM?

The Summer VPK Program is a **FREE**, voluntary, 300 instructional- hour program designed to prepare Florida's 4-year-olds for successful entry into kindergarten.

WHO IS ELIGIBLE FOR THE 2011 SUMMER VPK PROGRAM?

Children who reside in Florida and turned 4 years of age by September 1, 2010 (*born September 2, 2005 to September 1, 2006*) who did not use a VPK Certificate during the 2010-2011 School Year may participate in 2011 Summer VPK. Parent's unsure of their child's eligibility should call to verify before going to register.

WHERE IS SUMMER VPK?

In Hillsborough County, the 2011 Summer VPK Program is delivered at 20 elementary schools and by a select number of approved private child care providers. A list of schools and private providers are contained on the following pages of this packet. Parents decide where their child attends the program!

HOW DO I ENROLL MY CHILD IN THE SUMMER VPK PROGRAM?

Parents or legal guardians **MUST** (1) complete a VPK Child Enrollment Form, (2) provide proof of the enrolling child's age and proof of residency in the State of Florida with a current address, and (3) take these items to a VPK enrollment location to receive a VPK Certificate of Eligibility.

Details on what serves as acceptable proof of age and proof of residency is on the following pages. Enrollment must be completed in person. Enrollment **may not** be completed online, by mail, at a private child care center or by telephone.



WHAT WILL SERVE AS PROOF OF AGE?

Parents/legal guardians must provide proof that the enrolling child is age-eligible. A copy of any **ONE** of the following will serve as proof of age:

- Certified birth record or certificate
- A valid passport
- A certificate of arrival in the US showing age
- A valid military dependent ID card
- A certified copy of baptism or religious record with affidavit
- A shot/immunization record indicating the date of birth signed by a public health officer or practicing physician

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WHAT WILL SERVE AS PROOF OF RESIDENCY?

Parents/Legal Guardians must provide proof that they are residents of the state of Florida. Any ONE of the following with a current address on it will serve as proof of Florida residency:

- A Florida driver's license
- A Florida identification card
- A utility bill
- A pay stub
- Property tax assessment showing homestead exemption
- Residential rental agreement or receipt from rental payment
- A military order showing the child's parent is a service member in the United States Armed Forces and is assigned to duty in Florida when the child attends the VPK program.

Beginning April 4, 2011, parents/legal guardians may also register for 2011 Summer VPK at the these elementary school sites. Registrations will only be accommodated during regular school hours and parents should call the school for the best time register.

2011 Summer VPK PUBLIC SCHOOL SITES



Parents/legal guardians may choose from the following elementary school locations for the 2011 Summer VPK Program. In elementary schools, Summer VPK begins Monday, June 20, 2011 and ends Wednesday, August 10, 2011 and is held Monday - Thursday, closed on Fridays. The program day will begin at 7:30 a.m. and end at 6:00 p.m.

Elementary School Name	Address	City	Zip Code	School Main Phone Number
Bailey	4630 Gallagher Road	Dover	33527	707-7531
Bing	6409 36th Avenue South	Tampa	33619	872-5387
Bryan PC	2006 West Oak Avenue	Plant City	33563	757-9300
Buckhorn	2420 Buckhorn School Court	Valrico	33594	744-8240
Chiles	16541 Tampa Palms Boulevard W.	Tampa	33647	558-5422
Claywell	4500 Northday Blvd.	Tampa	33624	975-7300
Crestwood	7824 North Manhattan Avenue	Tampa	33614	872-5374
Cypress Creek	4040 19th Avenue N.E.	Ruskin	33573	671-5167
Egypt Lake	6707 N. Glen Avenue	Tampa	FL 33614	671-5100
Frost	3950 Falkenburg Road	Riverview	33578	740-4900
Gorrie	705 De Leon St	Tampa	33606	276-5673
Just	1315 Spruce Street	Tampa	33607	276-5708
Mango	4220 Highway 579	Seffner	33584	744-8211
Mitchell	205 Bungalow Park	Tampa	33609	872-5216
Potter	3224 East Cayuga	Tampa	33610	276-5564
Shaw	11311 North 15th Street	Tampa	33612	975-7366
Sheehy	6402 North 40th Street	Tampa	33610	233-3800
Sulphur Springs	8412 13th Street	Tampa	33604	975-7305
Summerfield	11990 Big Bend Road	Riverview	33569	671-5115
Tinker	8207 Tinker Street	MacDill AFB	33621	840-2043

2011 Summer VPK PRIVATE PROVIDERS



Parents/legal guardians may also choose from approved VPK private providers for the 2011 Summer VPK Program. Parents should check with individual private providers regarding the times and start and end dates of their 2011 Summer VPK Programs.

This list was last updated on Wed, April 13, 2011. It will be updated as new providers may be approved and added to the list— so check back often at www.elchc.org.

PROVIDER/CENTER NAME	CONTACT	ZIP	PHONE	FAX
Family of Christ 16190 Bruce B. Downs Tampa	Jill Hammond	33647	558-9343	514-0453
First Discoveries Child Development Center 4003 S. Manhattan Avenue Tampa	Cindy McConnell	33611	831-8085	NA
Primavera Preschool 13601 W. Hillsborough Avenue Tampa	Elsa Cruz	33635	855-6718	855-6716



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Where to Enroll for VPK

Enrollment for VPK **MUST** be done in person at any of the locations listed below. Parents may NOT register by fax, e-mail, mail, online, or at a private child care facility.

Early Childhood School Readiness Programs - Plant City

701 Tillman Place, Plant City, FL 33566
(813) ???-????
Saturday, May 14, 2011
8:30 a.m. - 11:30 a.m.

Town & Country Library

7606 Paula Drive, Tampa, FL 33615
Saturday, May 21, 2011
10:00 a.m. - 1:00 p.m.

Early Childhood School Readiness Programs North Tampa Office

9309 North Florida Avenue - Suite 104, Tampa, FL 33612
Monday - Thursday 8:00 a.m. - 4:30 p.m. Friday 8:00 a.m. - Noon
(813) 915-3200

Beginning Monday, June 13, 2011 to August 4, 2011
Monday - Thursday 7:30 a.m. - 5:30 p.m. Friday Closed June 17,
2011 - August 5, 2011

*Week of July 5, 2011 - July 8, 2011:
Monday-Closed, Tuesday - Thursday 8:00 a.m. - 4:30 p.m.
Friday 8:00 a.m. - Noon

Early Childhood School Readiness Programs - Bay Plaza Office

9325 Bay Plaza, Suite 210, Tampa, FL 33619
(813) 740-4713, press 3
Monday - Thursday 8:00 a.m. - 4:30 p.m. Friday 8:00 a.m. - Noon

Beginning Monday, June 13, 2011 to Thurs., August 4, 2011
Monday - Thursday 7:30 a.m. - 5:30 p.m. Friday Closed
June 17, 2011 - August 5, 2011 Open on Fridays 8:00 a.m. - Noon

*Week of July 5, 2011 - July 8, 2011:
Monday-Closed, Tuesday - Thursday 8:00 a.m. - 4:30 p.m.
Friday 8:00 a.m. - Noon

The Early Learning Coalition of Hillsborough County

The Children's Board of Hillsborough County Bldg.
1002 E. Palm Avenue, Suite 100, Tampa, FL 33605
(813) 202-1000

Mondays Only 9:00 a.m. - 4:00 p.m.

Beginning Friday, June 17, 2011 - August 5, 2010
Fridays Only 9:00 a.m. - 4:00 p.m.

VPK Enrollment Checklist

- I have determined that my child is age eligible for the 2011 Summer VPK Program
- I have proof of my child's age/date of birth
- I have proof of my Florida residency with a current address
- I have completed the VPK Child Application Form
- I have gone to a VPK registration location with all of the above information and have received my VPK Certificate of Eligibility
- I have selected a Public School Site or Private Child Care Provider VPK Program to send my child to.
- I have given my VPK Certificate of Eligibility to my selected VPK Program location

Your enrollment is now complete!



I. CHILD AND PROGRAM INFORMATION

Type or print in black or blue ink

To be eligible for the VPK program, a child must be 4 years old, but not yet 5 years old, on September 1st.

1. VPK program year	2. Preferred program schedule (check one): <div style="border: 1px solid black; padding: 2px; margin: 2px;"> School-year program (540 hours): <input type="checkbox"/> School year <input type="checkbox"/> Winter/spring only <input type="checkbox"/> Fall/winter only <input type="checkbox"/> Summer program (300 hours) </div>		3. Preferred program setting: <input type="checkbox"/> Private provider (child care, private school, faith-based) <input type="checkbox"/> Public school	
4. Child's first name	Middle name	Last name	Jr./III	5. How did you hear about VPK? <input type="checkbox"/> Television <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> Other
6. Date of birth (mm/dd/yyyy)	7. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	8. Social security number ¹ ----- DO NOT NEED -----		9. Primary spoken language
10. Home address (number and street)				
11. City		12. County	13. State FLORIDA	14. ZIP+4 Code
15. In which county do you wish your child to receive VPK services?		16. Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	17. Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American <input type="checkbox"/> Hawaiian or Other Pacific Islander <input type="checkbox"/> White

¹ NOTE.—See the Privacy Act Statement concerning social security numbers in the instructions accompanying this application.

II. PARENT OR GUARDIAN INFORMATION

18. <input type="checkbox"/> Mr. First name		Middle name	Last name	Jr./Sr./III
<input type="checkbox"/> Ms.				
19. Parent's or guardian's home address (number and street)				<input type="checkbox"/> Same as child's address
20. City		21. County	22. State	23. ZIP+4 Code
24. Relationship to child	25. Daytime telephone	26. Home telephone	27. Email (optional)	
Other parent or guardian (if applicable)				
28. First name	Middle name	Last name	Jr./Sr./III	29. Relationship to child
				30. Home address of other parent or guardian: <input type="checkbox"/> Same as child's address

III. OTHER EARLY LEARNING PROGRAMS (optional)

Your family may be eligible for other early learning programs or services for you and your children, from infants through school-age, including full-day school readiness services, resource and referral, Florida Kid Care, and social services.

31. Would you like to receive information about other early learning programs or services? (check one) YES NO

IV. CERTIFICATION

I have examined this application and, to the best of my knowledge and belief, the information provided is true and correct. If I enroll my child in the VPK program, I understand that my child will be required to participate in the statewide kindergarten screening to determine readiness for kindergarten. I understand that transportation for the program is my (parent's or guardian's) responsibility. I also understand that it is my responsibility to locate an eligible VPK provider or school and enroll my child with the provider or school. I understand that I may enroll my child in either a school-year program (540 instructional hours) or a summer program (300 instructional hours). I further understand that I (parent or guardian) must follow the provider's or school's attendance policy and verify my child's attendance each month.

32. Parent or guardian signature	33. Date
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OFFICIAL USE ONLY			
Process agent	Date	Process manager	Date
		DOB verification _____	
		Residency _____	
		Parent signature _____	
		Child eligibility _____	