**APPLICATION FORM**

\_\_\_\_\_\_\_ I would like for my child to be a student in the Wilson County Inclusive Early Childhood Pilot Program.

\_\_\_\_\_ I would like to be contacted to discuss the Wilson County Inclusive Early Childhood Pilot Program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Preschool Child

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate of Child

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent’s Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Telephone or Cell Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Evening Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School District

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Year

This pilot project will provide children who are grouped heterogeneously the opportunity to interact and learn from each other as well as to gain greater understanding of human diversity and its value to our society. All students benefit from carefully designed instruction that meets their individual levels. In addition, students:

* Are taught by highly qualified early childhood teachers
* Have a challenging learning environment
* Learn to appreciate individual needs of students with special learning needs
* Will increase self-confidence
* Develop friendships with children with a variety of learning abilities
* Have more positive self-images by learning from and teaching each other

**For more information, contact:**

**Student Services-Jane Jones**

**P.O. Box 555**

**Wilson, VA 22000**

**Phone: 800.5551212**

**Fax: 800.555.1234**

**WILSON COUNTY**

**PUBLIC SCHOOLS**



**INCLUSIVE  
EARLY CHILDHOOD PILOT PROGRAM**

**The Wilson County Public Schools Early Childhood Pilot Program is committed to:**

* **Student achievement**
* **Pursuit of lifelong learning**
* **Personal Responsibility**
* **High Quality of Life**
* **Equal Opportunities**

# for ALL

**PROJECT DESCRIPTION**

Inclusive classrooms consist of equal numbers of same-aged children with and without disabilities attending classes together. The Wilson County Inclusive Early Childhood classes will be in session Wednesday and Thursday beginning as soon as possible. Class hours will be from 9:00 a.m. to 1:30 p.m.

Selection criteria are listed below:

* Consideration will be given to children living in Wilson County
* Children must be at least 3 years old
* Children must be toilet trained
* Children must enjoy the company of other children

Only those children meeting the criteria will be considered. The number of students selected will be based on the make-up of the Early Childhood Special Education class. Notification letters will be sent to parents.

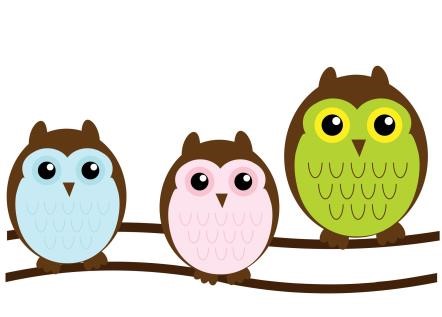
**PARENT RESPONSIBILITIES**

We believe that parents are the primary facilitators of their child’s development. The Wilson County Inclusive Early Childhood Pilot Program will offer many opportunities for families to participate in the early childhood learning environment.

If your child is selected to participate in the program, it will be necessary for parents to:

* Attend a parent orientation
* Supply items on the preschool supply list
* Apply and be eligible for the free/reduced lunch program
* Volunteer services for the class as needed

Transportation needs will be considered on an individual basis.



**HOW TO APPLY**

To apply, fill out the application section on this brochure and return to the Early Childhood Coordinator. Once selections have been made, parents will be notified as to acceptance. An orientation meeting will be held prior to enrollment.

If your child is selected to participate in the

Wilson County Inclusive Early Childhood Pilot Program, the parent must present the following documents in order to register the child in school:

* A current state physical examination record
* A current immunization record
* Proof of residency in Wilson
* Birth certificate
* Completed USDA food application

