

## Children with Disabilities

At least 10% of enrollment opportunities are given to children with disabilities.

Our program includes children with visual, communication, hearing, mental, physical, or emotional disabilities.

Head Start collaborates with local school districts and Area Education Agencies (AEA) who provide services and resources to families of children with disabilities.

## Transportation Information

Our program does not provide transportation. The majority of our site locations are located on or near a public bus route.



## Eligibility Requirements

- ◆ Must live in Scott, Clinton, Cedar, or Muscatine County
- ◆ Child is 3, 4, or 5 years old not yet eligible for Kindergarten
- ◆ Family income must fall within Federal Poverty guidelines

## How To Apply?

**Complete the enclosed application and return with the following:**

- 1) **Child's Proof of Birthdate**  
(Birth Certificate or Immunization Record)
- 2) **Copy of ALL ANNUAL INCOME**

*Include one or more of the following documents:*

- ⇒ Current filed Tax return  
(*Electronic pages 1 & 2*)
- ⇒ Current W-2's
- ⇒ Social Security Income (SSI) Statement
- ⇒ Family Investment Program (FIP) notice of Decision
- ⇒ Child Support Income Statement
- ⇒ Scholarships or School Grant Notice

*If you are not the applying child's parent/legal guardian you must provide legal documentation such as DHS Foster care Placement, Safety Care Plan, or Adoption Decree. A NOTARIZED LETTER OR STATEMENT IS NOT VALID AS A LEGAL DOCUMENT.*

**Mail, Fax, or Drop off your completed application with Annual Income to any of these locations:**

### Scott County:

Community Action of Eastern Iowa  
500 East 59th Street  
Davenport, Iowa 52807  
**(563) 324-3236**  
**Fax # (563) 324-7736**

### Muscatine County:

Muscatine Head Start  
148 Colorado Street  
Muscatine, IA 52761  
**(563) 264-2026**

### Clinton County:

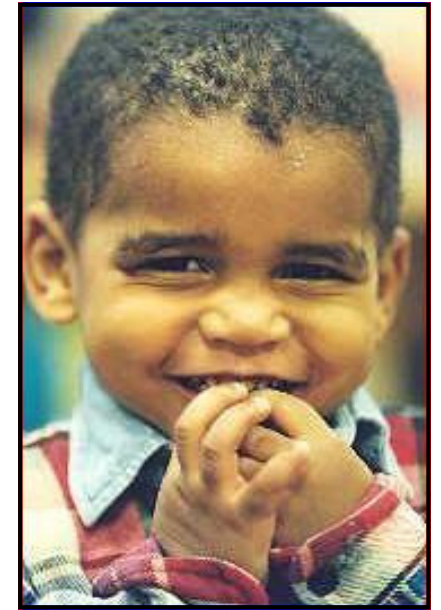
Clinton Head Start  
350 5th Avenue North  
Clinton, IA 52732  
**(563) 243-1462**

### Cedar County:

Tipton Head Start  
101 Lynn Street  
Tipton, IA 52772  
**(563) 886-1441**



Photos courtesy of Head Start Early Childhood Learning & Knowledge Center (ECLKC)



Community Action of Eastern Iowa

# Head Start

3-5 years

**FREE, High-Quality  
Preschool Program**



**(563) 324-3236**

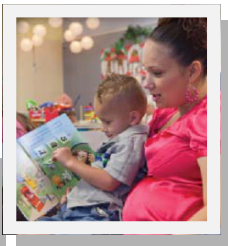
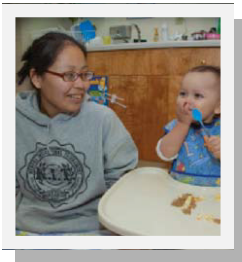
[www.iacommunityaction.org](http://www.iacommunityaction.org)

## Head Start Provides

- **FREE** quality Early Childhood education for children ages 3-5 years
- Developmental curriculum
- Kindergarten Readiness
- Nutritious meals
- Health Services
- Family Support services
- Parent and child interactions
- Support for children with disabilities

## Priority Given To

- Low Income Families
- Foster Children
- Homeless
- Teen Parents



## About CAEI Head Start

Community Action of Eastern Iowa- Head Start has been providing comprehensive preschool programming for over 45 years.

Currently the program serves over 500 children ages 3-5 and their families in Cedar, Clinton, Muscatine and Scott counties.

Our program provides full day and part day site options. \*Work and/or school requirements must be met to be eligible for a full-day site.

## Head Start Application

<b>Applying Child's Name:</b>		<b>Child's Birth Date:</b>	<b>Gender:</b> Male Female	
<b>Living Address:</b>		<b>City:</b>	<b>ZIP:</b>	
<b>Primary Language Spoken at Home (circle one):</b> English Spanish Other:		<b>Race (circle one):</b> Asian Black Native American Pacific Islander White Other:		<b>Hispanic/Latino?</b> Yes No
<b>Does this child's family participate in any of the following programs? (circle all that apply)</b> SNAP (Food Stamps) FaDSS (Family Development and Self Sufficiency) WIC (Women Infant & Children) Promise Jobs				
<b>Does this child have medical insurance?</b> Yes No <b>What type?</b>				
<b>#1 Parent/Legal Guardian who lives with and supports applying child:</b>		<b>Birth Date:</b>	<b>Gender:</b> Male Female	
<b>Phone number(s):</b>	<b>How are you related to applying child?</b>	<b>Do you work at least 28 hrs per week or go to school full-time?</b> Yes No	<b>Highest grade completed?</b>	
<b>#2 Parent/Legal Guardian who lives with and supports applying child:</b>		<b>Birth Date:</b>	<b>Gender:</b> Male Female	
<b>Phone number(s):</b>	<b>How are you related to applying child?</b>	<b>Do you work at least 28 hrs per week or go to school full-time?</b> Yes No	<b>Highest grade completed?</b>	
<b>List siblings who live with the applying child and are supported by the Parent/Legal Guardian(s) above:</b>		<b>Birth Date</b>	<b>Gender</b>	
1.			Male Female	
2.			Male Female	
3.			Male Female	
4.			Male Female	

**EACH PARENT/LEGAL GUARDIAN**  
**MUST ATTACH PROOF OF ALL ANNUAL INCOME**