

Special Services Department
South Windsor Public Schools

Office Use Only

Date Received: _____

Preschool Child Find
Request for Assistance

Directions: Submit this completed form to your district elementary school with initial registration documents. Provide: 1. Birth certificate or passport 2. Parent ID AND 3. Three documents are required to demonstrate proof of residency. The burden of proof in determining residency shall be on the party claiming residency in the town of South Windsor. One document which demonstrates property rights (mortgage statement, property tax bill, ownership deed or lease/rental agreement (must be updated annually), plus two documents which demonstrate property occupancy: one or more utility bills (cable, water, electric, gas/oil, telephone), auto registration/auto insurance plus valid driver's license with current South Windsor address; current homeowner's insurance declaration page.

Child's Name: _____ DOB: _____ Age: _____ Gender: _____

Parent(s) Guardian Foster Parent(s)

Name: _____ Address: _____

Phone (Home): _____ Phone (Cell): _____

E-Mail: _____

Person Making Referral: _____ Relationship to Child: _____

Phone (if not parent): _____

Description of Concerns (please be specific): _____

Preschool/Magnet School/Daycare: _____ Schedule: _____

Teacher(s): _____ Phone: _____

Physician: _____ Phone: _____

Health Concerns (please be specific): _____

I give my approval for the staff of South Windsor Public Schools to observe and/or to provide a screening for my son/daughter: _____.

Signature

Date