

## **Hebron Public Schools**

## Hebron Early Childhood Center At Gilead Hill Preschool Program



\_Date:\_\_\_\_\_

## Lottery Application 2022-2023

## **Lottery Enrollment Deadline:**

Please return completed form with two proofs of residency (see below) to the Gilead Hill School Office by **February 25, 2022** 

Student Name:

M/F or Non-Binary	Age: Date of Birth:(must be 3 or 4 by December 31, 2022)			
Name of Parent(s)/Guard	dian(s):		<del></del>	
Address:	Apt. #	t:Town:	Zip:	
Primary Phone #Alternate Phone #				
Email Address:				
	our household			
*Total Household Incom	e	_		
* Hebron Public Schools i seat through our School i		ou to determine if yo	ur child is eligible for a pro	eschool
	Please initial the	following statem	ents:	
I understand that my child must reside in Hebron at the time of the lottery to be eligible to				
participate in the lottery and enroll in the preschool program.				
I understand parents are				
I understand that if I accores responsible for paying tu	• •	ebron Early Childhoo	od Center, I am	
•	•		m, registration forms and	
records of required immunizations will need to be completed and submitted to the school.				
residency documents. P	•	e statement, lease/	verified through two app rental agreement or prop	
Parent/Guardian Signatu	re:		Date:	
	tery Drawing: March 16,			

All applicants will be notified of their acceptance or waitlist status by phone.

The Hebron Early Childhood Center does not discriminate on the basis of diverse racial, ethnic, religious, or economic backgrounds, and includes children with special needs.