

2024-2025 4SR Program/Payment Options:

STUDENT INFORMATION

Student Name: _____

CLASS DESCRIPTION

We offer half-day preschool options up to five days a week. Preschool classes are 8:00 – 11:00 or 12:00 – 3:00 depending on which class you choose. We offer wrap around care if you would like your child to stay the full day. If you register your child for wrap around care, your child can be dropped off as early as 6:30 A.M. and stay as late as 6:00 P.M.

SCHOOL READINESS TUITION:

☐ We will pay the full monthly tuition amount
Preschool and Wrap Around Care

5 Days = \$ 762/Month | 3 = \$ 478/Month | 2 = \$ 330/Month

Preschool Only:

5 Days = \$ 350/Month | 3 = \$ 220/Month | 2 = \$ 160/Month

☐ We are requesting tuition assistance (price breakdown listed below)

****A copy of your most recent tax form must be provided to receive tuition assistance****

Preschool and Wrap Around Care

5 Days: \$ 0 to \$ 30,000 = \$ 650/month

3 Days: \$ 0 to \$ 30,000 = \$ 405/month

2 Days: \$ 0 to \$ 30,000 = \$ 277/month

Preschool Only:

5 Days: \$ 0 to \$ 30,000 = \$ 238/month

3 Days: \$ 0 to \$ 30,000 = \$ 147/month

2 Days: \$ 0 to \$ 30,000 = \$ 107/month

**Prices listed are tentative rates.
Rates for 24-25 have not been
finalized yet.**

\$ 30,001 - \$ 49,999 = \$ 688/month

\$ 30,001 - \$ 49,999 = \$ 430/month

\$ 30,001 - \$ 49,999 = \$ 294/month

\$ 30,001 - \$ 49,999 = \$ 276/month

\$ 30,001 - \$ 49,999 = \$ 172/month

\$ 30,001 - \$ 49,999 = \$ 124/month

☐ We are requesting to apply for a scholarship

****Scholarship applications will be mailed home for completion mid-July. If your child does not qualify for a scholarship, Community Ed will contact you regarding what your payment will be. Scholarships only apply towards preschool tuition. Wrap around care is a separate cost. ****

PRESCHOOL CLASSES: SELECT WHICH CLASS YOU ARE REGISTERING FOR

Program Option

5 Half Days

3 Half Days

2 Half Day

Placement letters will be mailed home in May to notify you which class, days, and times your child is registered to attend.

WRAP AROUND CARE

☐ No, we will not be sending our child to wrap around care

☐ Yes, we will be sending our child to wrap around care

PARENT/LEGAL GUARDIAN OF STUDENT CERTIFICATION

Authorizing signature: _____

I understand that by registering for the School Readiness Program and/or Wrap Around Care, by signing above, I agree to fulfill my obligation by paying the monthly tuition payments on time each month. Payment is due in full by the 15th of each month. If I fail to make my monthly obligation, Milaca Public Schools will turn my account over to a collection agency by the 20th of each month to collect any monies owed to them.

OFFICE USE ONLY

Student Start Date: _____

Student End Date: _____

Program: _____

Attending Wrap Around Care: ☐ Yes ☐ NoPayment Plan: ☐ Pay in Full☐ Requesting assistance☐ Scholarship

2024-2025 Payment Schedule:

Payment Info:

Placement letters will be mailed home early May to notify families which class, days, and times your child is registered to attend. Full payment info will also be included.

Before your preschooler can begin programming, you need to call Community Education at (320) 982-7307 to set up automatic payments. Monthly tuition will be automatically charged on the 15th of each month. If the 15th falls on a weekend, or holiday, Milaca Public Schools will charge your card the next business day. If the credit card on file is declined for any reason, there will be a \$25.00 fee added to your monthly tuition that is due and payable immediately. It is your responsibility to make sure your credit card is up to date and the expiration date is valid. Your preschooler will not be able to attend programming until a new payment is submitted and approved.

If tuition is paid in full with cash or a check, you will receive a 10% discount for payment in full. If tuition is paid in full with a credit card you will receive a 5% discount for payment in full. Full payment must be made before the first day of preschool to qualify for the tuition discount.

Payment Schedule:

<u>Month</u>	<u>Due Date</u>
September Tuition	August 15
October Tuition	September 15
November Tuition	October 15
December Tuition	November 15
February Tuition	January 15
March Tuition	February 15
April Tuition	March 15
May Tuition	April 15

There is no tuition due for the month of January. This is a free month for all families.

Parent/Legal Guardian of Student Authorization

By checking this box and signing below I, _____ understand that I am financially responsible for my child's monthly tuition obligation and agree to the above Payment Terms and authorize Milaca Public Schools to automatically charge my credit card on the 15th of each month beginning August 15, 2024 through April 15, 2025.

Authorized Signature:

Date:

GENERAL INFORMATION: This questionnaire should be completed only ONE TIME per school year FOR EACH FAMILY ENROLLED in the Early Childhood Family Education (ECFE) and/or the School Readiness Program. Each family is asked to voluntarily provide participant information that will be used for local and state program planning and evaluation. If you do not provide this information, it will not prevent you or your child from participating in ECFE or School Readiness. Only one family member should complete this questionnaire. DO NOT write your name on this form. The information that you provide will be kept confidential and WILL NOT be directly connected with you or your family.

Minnesota
Department
of Education

SCHOOL
YEAR

1. Please indicate whether you are this child's

- ☐ Mother ☐ Father ☐ Grandmother ☐ Grandfather
☐ Foster Mother ☐ Foster Father ☐ Guardian ☐ Other Relative

2. Your highest level of school completed (mark only one box):

- ☐ Eighth Grade ☐ Associate's Degree
☐ 12th Grade ☐ Bachelor's Degree
☐ High School Diploma ☐ Master's Degree
☐ Some college but no degree ☐ PH. D.

3. Your Date of Birth (Month/Day/Year): ____ | ____ | ____

4. Your current job status (mark only one box):

- ☐ Employed more than 25 hours per week ☐ Unemployed, seeking employment
☐ Employed less than 25 hours per week ☐ Unemployed, not seeking employment

5. The racial/ethnic of your children (check all that apply)

- ☐ White ☐ Black/African American ☐ Hispanic or Latino ☐ Asian
☐ Native Hawaiian or Other Pacific Islander ☐ American Indian/Alaskan Native
☐ Other, single race ☐ Other, two or more races

6. What are your primary languages (circle all that apply)

- ☐ English ☐ Arabic ☐ Spanish ☐ Russian
☐ Hmong ☐ Mandarin ☐ Somali ☐ Laotian
☐ Vietnamese ☐ Oromo ☐ Karen ☐ Cambodian
☐ Other: _____

7. What was your household's total yearly income, before taxes last year, rounding to the nearest thousand?

\$ _____

8. How many people were in your household last year?

2 3 4 5 6 7 8