

TANF Preschool Name: \_\_\_\_\_ TANF Preschool Location \_\_\_\_\_

**TANF PRESCHOOL ENROLLMENT APPLICATION 2023-2024**

*Your child is applying to participate in a state preschool program. The information being gathered will be kept confidential and only used for the purpose of the TANF Preschool Reporting to the state. Thank You!  
As a reminder: Proof of income must be attached and incomplete forms cannot and will not be accepted.*

**Household Information**

<b>1. Name of Parent(s) or Guardian:</b>		
<b>2. Mailing Address:</b>		
City:	State:	Zip Code:
<b>3. Telephone: (        )        -       </b>		<b>Email: _____</b>
<b>4. Child's Full Name:</b>		
<b>5. Child's Social Security Number</b> _____ - _____ - _____		
<b>6. Date of Birth: (mm/dd/yyyy)</b> -        -		
<b>7. Place of Birth: city:</b> _____		<b>state:</b> _____
<b>8. Income: (circle)</b> <b>a. Annual    b. Monthly    c. Bi-weekly    d. Weekly</b>		
<b>9. Income Verified through: (circle)</b> <b>a. Wage stub    b. 1040 or W-2-only for self-employed    c. Other: _____</b>		
<b>10. Are you currently homeless yes or no</b> _____		

Income, except from self-employment, must be **gross** (before any deductions) including taxes and Social Security). Income from self-employment, such as child care, should be **net**. Tax forms should be used for **self-employed persons only**.  
To convert income to monthly: weekly income x 4.33; bi-weekly x 2.15; twice a month income x 2

**Pay periods must be on income that shows 1 month of pay. If no income is reported, a written, signed and dated statement of no earned income must accompany this form.**

Please print the first and last names of everyone living in your household, including all adults and children. Put a ✓ next to the name of each child who will be claimed on the food program. You may attach an additional sheet if needed.	age	monthly earnings from work	monthly child support, welfare, alimony	monthly SSI, Social Security, retirement, pension	monthly all other income (specify source)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

**Certification Statement**

*I certify that all of the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of federal funds; that agency officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable state and federal laws. The signature on this application is that of an adult household member.*

**Signature** \_\_\_\_\_ **Today's Date (mm/dd/yyyy)** \_\_\_\_\_

<b>Have you completely filled in ALL sections, attached pay stubs and signed this form?</b>	Yes	No
<b>Is your child covered under KidCare?</b>	Yes	No
<b>Would you like to enroll to receive child health insurance services?</b>	Yes	No

**Preschool Administrators:** All Forms may be sent electronically and are due to C/O Amy Reyes at the Wyoming Department of Education no later than September 30, 2023. Thank You!

### Eligibility Guidelines for TANF Money (Non-Assistance)

- TANF money shall only be used for one (1) or more of the following:
  1. Provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives;
  2. End the dependence of needy parents on government benefits by promoting job preparation, work and marriage;
  3. Prevent and reduce out-of-wedlock pregnancies; and establish annual numerical goals for preventing and reducing the incidence of these pregnancies; and
  4. Encourage the formation and maintenance of two parent families.
- Contractor shall be specific on what TANF purpose their program/service is addressing.
- Participants served shall be families with a child(ren) with income below 185% of the Federal Poverty Level (FPL).
- Participants also shall meet citizenship/eligible immigrant and residency criteria to be served.

Following are the 185% FPL monthly and annual income guidelines effective **April 1, 2023**:

	<b>185% FPL</b>	<b>185% FPL</b>
<b>Household Size</b>	Potential TANF eligible Monthly Income	Potential TANF eligible Yearly Income
<b>1</b>	\$2,247.75	\$26,973.00
<b>2</b>	\$3,040.17	\$36,482.00
<b>3</b>	\$3,832.58	\$45,991.00
<b>4</b>	\$4,625.00	\$55,500.00
<b>5</b>	\$5,417.42	\$65,009.00
<b>6</b>	\$6,209.83	\$74,518.00
<b>7</b>	\$7,002.25	\$84,027.00
<b>8</b>	\$7,794.67	\$93,536.00

For families/households with more than 8 persons, add \$9,509/year for each additional person.