Thank you for your interest in Head Start/Early Head Start. Head Start is a federally funded school readiness program for children, prenatal to age 5. Head Start provides services to eligible children and families in the areas of early learning, health, and family well-being, while engaging parents and guardians as partners, every step of the way. Head Start includes preschool programs that serve children 3-5 years old, and Early Head Start programs for infants, toddlers, and pregnant women.

Call your local center to find out what options are offered!

GIVE YOUR CHILD A HEAD START FOR FUTURE SUCCESS

Don't delay! Space is limited!





Complete an Application



Use this QR Code to complete this application online. It's quick and easy!

OR

Fill out the attached application. Make sure it's filled out completely and there is a signature and date!



Provide Documents

Provide proof of income: 2021 • 2020 Tax Form 1040 or • 2020 W-2 Forms from 2021 We will need income for both parents/guardians, if applicable.

 If you receive TANF or Supplemental Security
 Income, we will need a copy of the award letter.

Child's Current
 Immunization Record
 Proof of Age: Birth Certificate
or Hospital Record if Available



After Application is Submitted

A Family Support Specialist will be in touch with you to begin the process and schedule an eligibility interview. The application process cannot be completed without this interview.



Complete Eligibility Interview

A short interview is needed to review documents to determine eligibility. The next steps will be discussed at this time. Be prepared with any documents that have been requested!



WHILE YOU'RE WAITING, MAKE APPOINTMENTS WITH YOUR HEALTH AND DENTAL PROVIDERS NOW!

Due to COVID-19, it might take longer to get your child's yearly physical and dental exams. Make those appointments now, so you can get in soon. Don't forget to get copies for us!

Please return the application to your local site or to: NACOG Head Start • 121 East Aspen Ave. • Flagstaff • AZ • 86001 • nacoghs@nacog.org • (928) 774-9504

Apache County

Round Valley Head Start & Early Head Start roundvalley@nacog.org 928-551-6696

St. Johns Head Start & Early Head Start stjohns@nacog.org 928-337-4211

Navajo County

Blue Ridge Head Start blueridge@nacog.org 928-358-5274

Blue Ridge Early Head Start pinetop@nacog.org

Holbrook Head Start & Early Head Start holbrook@nacog.org 928-524-6831

Show Low Head Start & Early Head Start showlow@nacog.org 928-537-7716

Snowflake
Head Start & Early Head Start
snowflake@nacog.org
928-536-7330

Winslow

Clear Creek Head Start clearcreek@nacog.org

Winslow Head Start winlsow@nacog.org 928-289-2651

Winslow Early Head Start winslowehs@nacog.org 928-289-2122

Flagstaff

Clark Homes Head Start clarkhomes@nacog.org 928-774-4021

Cromer Elementary Head Start Head Start cromer@nacog.org 928-714-7667

Flagstaff Early Head Start flagstaffehs@nacog.org 928-214-8461

Ponderosa Head Start & Early Head Start ponderosa@nacog.org 928-779-3244

> Puente De Hozho Head Start puente@nacog.org

Siler Head Start siler@nacog.org 928-526-1069

Sunnyside Early Head Start sunnyside@nacog.org 928-773-7970

Coconino County

Page Head Start page@nacog.org 928-645-8080

Williams Early Head Start williams@nacog.org 928-635-4273

Find Your Local Center!

If you would like to drop off or mail your application and documents, please call or email for the address.

Yavapai County

Ash Fork Head Start ash@nacog.org 928-637-1027

Beaver Creek (Rim Rock) Head Start beavercreek@nacog.org 928-567-4631 x 1002

Camp Verde Head Start & Early Head Start campverde@nacog.org 928-567-3182

Chino Valley
Head Start & Early Head Start
chinovalley@nacog.org
928-636-1076

Cottonwood Head Start cottonwood@nacog.org 928-634-8236

Yavapai (Clarkdale) Early Head Start yavapai@nacog.org 928-634-8308

Prescott Valley

Humboldt Head Start humboldt@nacog.org 928-759-5112

Liberty Head Start liberty@nacog.org 928-777-9778

Nye Early Head Start nye@nacog.org 928-237-5119

Prescott Valley
Head Start
prescottvalley@nacog.org
928-772-7726

Prescott Valley Early Head Start pcvalleyehs@nacog.org 928-772-7274



NACOG Head Start and Early Head Start

ENROLLMENT APPLICATION • Email: nacoghs@nacog.org

121 East Aspen Avenue, Flagstaff, AZ 86001 • Phone: (928) 774-9504 x. 1112; Fax: (928) 213-5212

FOR OFFICE USE ONLY
Type of Application: ☐ New Applicant ☐ 3 rd Year Re-Enrollment ☐ EHS Transition

Program Year:

CENTER:

CHILD INFORMATION											
NAME:								CHILD	CHILD'S PRIMARY LANGUAGE:		
TYOME						DATE OF BIRTH.					
Preferred Name:					GENDER: IS CHILD POTTY						
- ()					☐ M ☐ F ☐ Yes ☐ No ☐ Working						
RACE: (check one)	☐ American Ir				Asian ☐ Black/African American ☐ White ☐ Hispanic						
☐ Hawaiian/Pacific	islander 🗀 Bi	-Kacıal	/Multi-racial	⊔ Otr	her: (Specify)						
Has your child been				If yes,	, please explain: Does your child have an IEP						
having a disability o	r special need?	☐ Yes	□ No		or IFSP? ☐ Yes ☐ No						
FAMILY INFORMATION											
LIVING ADDRESS:					MAILING ADDRESS:						
City:	S	tate:				City:			State:		ip:
			·		-		1				·
						/			☐ One F☐ Two F		
transitional housing	, or living with a	notnei	ramily temp	orarily:	⊔ Yes (or LINO				□ IWO I	² arent
								-		(=)	
PARENT	/Guardian Info	DRMAT	ION (A)		PARENT/GUARDIAN INFORMATION (B)						
Name:			DOB:		Name:					DOB:	
Address:					Address:						
City: State:			Zip:		City:	State:			Zip:		
Home Phone #:	Cell Phone #:		Work Phone	#:	Home I	Phone #:	Cell Phone #: Work			Work Pho	one #:
								•			
Race:	Lar	guage	:		Race:			Langu	age:		
Email Address:					Email Address:						
Best way to □H	ome Phone D	Cell P	hone		Best way to ☐Home Phone ☐Cell Phone						
contact you? □Email Text Message OK? □Yes or □No				□No	contact you? □Email Text Message OK? □Yes or □No						
Marital Status:	Head of		Lives in			Status:	Head of			Lives in	
☐ Single	Household?		Household?		☐ Sing		Househo			Househo	
☐ Married ☐ Yes or ☐ No ☐ Yes or ☐ No				☐ Married ☐ Yes or ☐ No ☐ Yes or ☐ No Relationship to Child:							
Relationship to Child: ☐ Biological ☐ Adoptive ☐ Other:				Biological □ Adoptive □ Other:							
Highest Grade Completed:				Highest Grade Completed:							
☐ Less than HS ☐ Some College/AA Degree					☐ Less than HS ☐ Some College/AA Degree						
☐ HS Diploma/GED ☐ Bachelor Degree or Higher					☐ HS Diploma/GED ☐ Bachelor Degree or Higher						
Employment Status: ☐ Full Time ☐ Part Time ☐ Retired				Employment Status: ☐ Full Time ☐ Part Time ☐ Retired							
☐ Seasonal ☐ Unemployed ☐ Disabled ☐ Stay at Home						ional 🛮 Unem				☐ Stay a	
Are you Currently in School?			ary Status:		Are you Currently in School?				Military Status:		
☐ Full Time ☐ Part Time ☐ Active ☐ No				No	☐ Full Time ☐ Part Time ☐ Active					□No	
☐ Not in School			□ Veteran			☐ Not in School			□ Veteran		

Other Family Members Supported by Parent/Guardian's Income									
FIRST AND LAST NAME:	RELATIONSHIP TO G	UARDIAN:	RACE/ETHNICITY:	DATE OF BIRTH:					
PR	IOR OR CURRENT ENI	ROLLMENT INI	FORMATION						
DO YOU HAVE OTHER CHILDREN ENROLLED IN HEA	D START OR EARLY HEA	AD START?	Yes or □No IF YES	, NAME OF CHILD(REN):					
ARE YOU APPLYING ANOTHER CHILD IN YOUR FAMI	LY? □Yes or □No	IF YES, NAM	e of Child(ren):						
Which location(s) are you applying for?									
Preference 1:	Preference 2:		Preference	23:					
	FUGIRIUITY	NFORMATION	ı						
SERVICES YOUR FAMILY RECEIVES:	ELIGIBILITY			RIENCED IN THE LAST 12 MONTHS:					
(Check all that Apply)	□ None	(Check all that A							
☐ TANF ☐ SNAP/Nutrition Program ☐ W ☐ Unemployment ☐ Supplemental Security In	,	☐ Domestic Violence ☐ Health Issues ☐ Incarceration ☐ DCS Involvement ☐ Substance Abuse ☐ Loss of Parent							
□ DCS Involvement	icome (331)	☐ Military Deployment ☐ Deportation ☐ Language Barrier							
Is this Child in Foster Care?	or □No	□ Other: □ None							
How did you hear about us? ☐ We	bsite Sibling	g Enrolled	☐ Friend/Family	☐ Flyer or Poster					
☐ HS/EHS Staff ☐ Former Parent ☐	Community Event	☐ Communi	ity Agency	er:					
PLE	ASE READ SIGN AND	DATE VOLIR	Δρρι Ιζατίων						
PLEASE READ, SIGN AND DATE YOUR APPLICATION I understand that the information in this application will be held in strict confidence within the agency. I further understand that this is an application for									
services that are paid for with federal funds and that intentionally providing misleading, inaccurate or untruthful information of a material nature could result in disenrollment of my child from Head Start/Early Head Start and could have serious legal consequences for me. NACOG Head Start/Early Head Start does									
not discriminate based on race, color, national origin, sex, disability, age, reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.									
☐ Yes ☐ No: I consent to pictures and videos being taken of my child at Head Start to be used in newspapers, brochures, TV, bulletin boards, and on social media sites for public relations and marketing purposes.									
2.1.2.2., 1.1, 2.2									
Darant/Cuardia Signatura				Data					
Parent/Guardian Signature:				Date:					
Parent/Guardian Signature:				Date:					

Follow NACOG Head Start on:

