

Centralized Eligibility List Tulare County

Policies and Procedures Manual



Tulare County Office of Education

Tim A. Hire, County Superintendent of Schools

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TABLE OF CONTENTS

1. Introduction.....	2
2. Definitions.....	3
3. Participating Agency Responsibilities	4
4. CEL Administrator Responsibilities.....	4
5. Application Process	5
6. Updating Records.....	7
7. Filling Vacancies.....	7
8. Notifications to CEL Administrator	9
9. Delinquent Fees	9
10. Reasons for Removing Application from CEL.....	9
11. Confidentiality	10
12. Conflict Resolution	10
Application Form	11
List of Participating Providers and Programs	13

1. Introduction

As part of the State's Budget Act of 2005, the California Legislature mandated that each County have a Centralized Eligibility List (CEL) for families seeking subsidized child care services. The Tulare County Superintendent of Schools has been designated by the California Department of Education, Child Development Division, to implement the CEL for Tulare County.

All California Department of Education Child Development Division contractors are required to participate in order to be eligible for continued funding, with the following exceptions: CDD programs on a college campus, migrant programs, and the Bay Area severely disabled programs. Program participation in the CEL means both using the CEL to fill program vacancies with children of eligible families and submitting family applications to the CEL.

The Tulare County CEL is one list of all families waiting for subsidized child care in the county. One application places a family on the CEL and the information is available to all state subsidized child care, development and education programs in Tulare County.

The CEL is an eligibility list, not a waiting list. It does not operate on a first-come, first-served basis, but on the eligibility criteria and priorities of the subsidized programs as established by the California Department of Education Child Development Division. Each family is given an admission priority rank number based on family size and gross monthly income. Families with the lowest rank number are served first. A family's placement on the CEL can change at any time depending on the family's circumstances in relationship to other families on the list. When a program has a vacancy, the most eligible families on the CEL will be contacted first.

2. Definitions

Agency Administrator	Person responsible for adding, maintaining and deleting agent accounts for their own agency.
Agent	Person responsible for entering and updating information in the CEL database. The agent may also be responsible for retrieving the list of names used to fill vacancies.
CDE	California Department of Education
CDD	Child Development Division
CEL	Centralized Eligibility List
CEL Administrator	Agency responsible for the administration of the Tulare County CEL.
CPS	Child Protective Services
CWS	Child Welfare Services
Parent	The biological parent, foster parent, step parent, guardian or other person responsible for the health, care and safety of a child.
System Administrator	Person responsible for the overall operation and maintenance of the CEL database.

3. Participating Agency Responsibilities

- 3.1 Designating a primary contact for the CEL system.
- 3.2 Inputting all families seeking subsidized child care into the CEL database.
- 3.3 Participating in timely feedback processes. These may include meetings, surveys, questionnaires, or informal communication via phone, fax or e-mail.
- 3.4 Participating in initial and ongoing training and technical assistance as recommended and/or requested by the Superintendent's CEL Coordinator.
- 3.5 Agreeing that the use or disclosure of information pertaining to the child or the child's family be restricted to purposes directly related to the administration of subsidized child care services, and that the information is handled in such a manner as to ensure confidentiality of the names and addresses of individual CEL children and families.
- 3.6 Following CEL policies and procedures.
- 3.7 Ensuring that their agency profile information is up to date and correct.
- 3.8 To not hold families in pending status for more than seven days. When a family is in pending status, only the agency who has selected the family for possible enrollment has access to the family's eligibility information. When pending status is released, the family information is available to all child development contractors in Tulare County.
- 3.9 Agreeing to be identified as a participating agency through any media coverage the project may solicit.
- 3.10 Limiting the number of personnel who have access to the CEL ensuring that passwords are managed properly and confidentially. This includes, but is not limited to
 - 3.10.1. Adding new agents to the CEL database and giving them the appropriate permissions.
 - 3.10.2. Removing agents who no longer work for the agency, or who are no longer responsible for entering and retrieving information from the CEL database.

4. CEL Administrator Responsibilities

- 4.1 Hiring and supervising CEL staff.
- 4.2 Hosting and providing backup of the CEL.

- 4.3 Initial data migration.
- 4.4 Providing CEL database software, including maintaining, managing, and revising the software at no charge to the participating agencies.
- 4.5 Providing timely on-going training, technical assistance, and support to participating agencies and updating training materials as necessary.
- 4.6 Providing alternate communication in the event that a participating agency cannot connect via the Internet.
- 4.7 Managing user accounts and issuing passwords.
- 4.8 Evaluating technical problems and recommending software changes, if needed, to the software vendor.
- 4.9 Sending notices to parents on the CEL every six months to update their eligibility. If parents do not respond to an update request, they will be removed from the Centralized Eligibility list on the seventh month.
- 4.10 Submitting reports to the California Department of Education, Child Development Division.
- 4.11 Ensuring that program staff maintains family confidentiality.
- 4.12 The CEL Administrator is not responsible for
 - 4.12.1. Purchasing or maintaining computer hardware for agencies.
 - 4.12.2. Purchasing or maintaining any additional software not related to the CEL.
 - 4.12.3. Contracting for and maintaining an Internet connection.
 - 4.12.4. Acquiring or maintaining e-mail accounts.
 - 4.12.5. Providing any technical support not related to the CEL.

5. Application Process

- 5.1 Parents wishing to place their child on the CEL can apply by calling 651-3026 or (800) 675-3026, or by submitting a completed application form.¹ Application forms are available in English and Spanish at any of the participating agencies² and on the Tulare County Office of Education CEL website at www.4KidsCare.tcoe.org.

¹ See page 11

² See page 13

- 5.2 The CEL is set up to accommodate parental choice in selecting preferred zip codes, programs, and providers. Parents will indicate their preferences on the application form and the information will be entered into the CEL database. If no preferred zip code is listed, the household zip code will be used. If no preferred program is selected, all programs will be marked in the CEL database.
- 5.3 Participating agencies will enter application information into the CEL database within two working days after receiving it. If circumstances prevent the agency from entering the information within that time frame, the application will be faxed to the CEL Administrator's office for input. The fax number is (559) 651-2465.
- 5.4 Agents will search the CEL database before adding a new applicant to avoid duplication of records. If a record already exists for the family, the agent will update it using the information on the current application form.
- 5.5 When a teen parent lives in their parent's home, both the parents and the teen will be listed in the CEL database as parents. Employment and income information will be included for all.
- 5.6 Unborn children cannot be listed on the CEL. Parents need to contact a participating agency or the CEL Administrator after the birth of a child to add them to the family's record.
- 5.7 A child with a current Child Welfare Services (CWS) or Child Protective Services (CPS) referral will be marked as CPS priority in the CEL database only when the parent provides a copy of the current referral letter indicating the expiration date of the referral. The priority indicator will be removed from the child's record on the expiration date, unless a copy of a new referral letter with a new expiration date is provided.
- 5.8 A child with exceptional needs will be marked as priority only if they have a current Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP) from a qualified professional or agency. Copies of these plans are not collected when the parent applies to the CEL, but will be verified when a parent is contacted to establish eligibility for enrollment in a CDD program.
- 5.9 Children thirteen (13) years of age and older will be entered into the CEL database as "other family member" unless the child has exceptional needs priority status as described above, in which case they will be considered active and the exceptional needs priority will be marked
- 5.10 The CEL Administrator will send a letter and informational brochure to new applicants explaining what the CEL is and how to contact the local Resource and Referral agency for additional information regarding child care.

6. Updating Records

- 6.1 It is the applicant's responsibility to keep their information accurate and up to date at all times. Applicants must update their information each time a change in their income, employment, family size, telephone number or address occurs by calling 651-3026 or (800) 675-3026. Applications must be updated at least once every six months, even if there are no changes, to remain active on the CEL. The CEL Administrator will send a reminder to applicants who have not updated their information during the prior five (5) months, giving thirty (30) days to respond. The CEL software program will automatically archive records of applicants after six months of inactivity.
- 6.2 Upon discovering that a telephone number in the CEL database is incorrect or disconnected, the agent will remove the number from the record and send an e-mail with the parent's name and address to the CEL Administrator at CEL@cc.tcoe.org. The CEL Administrator will send an information request to the parent, giving fifteen (15) days to respond. If there is no response within fifteen (15) days the record will be archived in the CEL database.
- 6.3 Each time an agent speaks with the parent of a child listed on the CEL, they will review and update the family's information in the CEL database.

7. Filling Vacancies

- 7.1 When an agency has a vacancy for subsidized child care a contact list of eligible names will be generated from the CEL. Criteria for the list will be the specifics of the agency's CDD contract type and any service areas or populations identified in their contract.
- 7.2 Parental preference will be accommodated by searching for families and children by preferred zip code, program and provider. This search will also include families that did not indicate a preference.
- 7.3 Children on the contact list will be placed into a "pending" status for a period of no more than seven (7) calendar days, during which time their names will not be available to any other agency for enrollment.
- 7.4 Agencies will not put more names into pending status than they can contact during the seven (7) day period.
- 7.5 Agency staff will make a reasonable attempt to contact parents before moving to the next name on the list. Each agency will define "reasonable attempt" in their individual CEL policies. Documentation of contact attempts will be recorded on the printed contact list and in the notes section of the CEL database.

- 7.6 Agencies may enroll the child of a “walk-in” parent provided they meet the need and eligibility requirements for the vacancy and there are no eligible children listed on the CEL for the vacancy. The circumstances supporting the enrollment must be documented.
- 7.7 During periods of mass enrollment, an agency may enroll “walk-ins” at the same time they enroll from the CEL provided the number of vacancies exceeds the number of eligible children on the CEL. Care must be taken not to enroll so many “walk-ins” that there are eligible children left on the CEL unserved.
- 7.8 Upon contacting a parent, agency staff will review and update the family’s information in the CEL database. If the updated information changes the child’s admission priority ranking, staff will inform the parent that their placement on the CEL has changed. The information will be recorded on the printed contact list and in the notes section of the CEL database. The agent will then proceed to the next name on the list.
- 7.9 If a parent declines child care services before the seven (7) day “pending” period is over the agent will place the child back into “active” status so he/she can be considered for other enrollment opportunities. The reason for declining services will be recorded on the printed contact list and in the notes section of the CEL database.
- 7.10 Once a parent is contacted and eligibility is verified the agent will place the child into a “pending/pre-enrolled” status for up to thirty (30) days, during which time the child’s name will not be available to any other agency for enrollment. This will allow parents time to submit required paperwork and documentation. If required paperwork and documentation is not received by the end of the thirty (30) day period, the child will automatically be placed back into “active” status by the CEL software program.
- 7.11 Upon enrolling a child the agent will change the child’s status to “enrolled” in the CEL database.
- 7.12 A child who is enrolled in a state subsidized child care program, except those enrolled in part-day State Preschool, may have their status changed from “enrolled” to “enrolled/waiting” only if one of the following reasons applies:
- 7.12.1. To provide continuity of care for a child who would lose care but is otherwise eligible. *Example: a toddler aging out of an infant/toddler program who needs full day preschool age care.*
- 7.12.2. When a legitimate need to transfer to another site exists. *Example: the family moves to another city.*
- 7.12.3. When there is a need for additional services that the program cannot provide. *Example: a child needing evening or weekend care.*

The “Notes” section of the CEL database will contain information indicating what change is needed, when the need will occur and who is currently providing subsidized care.

- 7.13 A child in a part-day State Preschool program qualifies for “enrolled/waiting” status only when there is a need to transfer to another part-day State Preschool program during a program year.
- 7.14 When a child is no longer enrolled in a program the agent will place the child back into “active” status, unless there is no longer a need for child care. In that case, the record will be changed to “other family member” status.

8. Notifications to CEL Administrator

- 8.1 Agencies will immediately inform the CEL Administrator by e-mail at CEL@cc.tcoe.org if the “Notes” section in the CEL database shows that:
 - 8.1.1. A child’s name has appeared on three different contact lists and each time the attempts to contact the parent have been unsuccessful.
 - 8.1.2. A parent has declined child care services twice.
- 8.2 The CEL Administrator will contact the parent. If there is no longer a need for child care the record will be archived in the CEL database. If services were declined due to parental preference of location, program or provider, the record will be updated to reflect the preferences.

9. Delinquent Fees

- 9.1 Parents terminated from a CDD funded program for failure to pay family fees are not eligible for any other CDD funded program until the delinquent fees are paid in full. Agencies will forward to the CEL Administrator at CEL@cc.tcoe.org the names and addresses of all terminated parents owing delinquent fees. The CEL Administrator will make the family’s record inactive in the CEL database.
- 9.2 When delinquent fees have been paid in full, agencies will notify the CEL Administrator, who will re-activate the family’s record in the CEL database.

10. Reasons for Removing Application from CEL

- 10.1 Family records will be terminated from the CEL
 - 10.1.1. When a parent doesn’t respond to a request from the CEL Administrator.

- 10.1.2. When mail is returned by the U S Postal Service the family's record will be archived. A note will be added to the record for documentation purposes.
- 10.1.3. When a parent requests to have their information removed from the CEL, the family's record will be terminated in the CEL database. A note will be added to the record documenting the parent's request.
- 10.2 Archived and terminated records will be deleted from the CEL database after twelve (12) months. A new application will be required if a parent subsequently decides to be placed back on the CEL.

11. Confidentiality

- 11.1 CEL applicant information is confidential and the use or disclosure of that information is restricted to purposes directly related to the administration of the program. Agency Administrators shall take steps to ensure this confidentiality is maintained at all times by
 - 11.1.1. Limiting access to the CEL by setting up usernames and passwords for only those staff directly involved in updating and retrieving applicant information.
 - 11.1.2. Ensuring staff do not share usernames and passwords with anyone.
 - 11.1.3. Ensuring staff do not leave the CEL database software program open at any time when leaving their workstation.
 - 11.1.4. Training staff to ask for identifying information when speaking to a parent instead of asking the parent to verify information in the CEL database.
Example: Ask the parent "What is your child's name and birth date?" instead of "Is *your son's name John?*" or "*Is John's birth date January 6, 2003?*"

12. Conflict Resolution

- 12.1 Parent concerns regarding the CEL should first be referred to the Agency Administrator. If the parent feels the concern has not been adequately addressed, they should contact the CEL Administrator.
- 12.2 If a parent or participating agency feels that the CEL Administrator for the Tulare County Superintendent of Schools has failed to comply with state and/or federal laws, the matter will be handled through the Tulare County Superintendent of Schools Uniform Complaint Procedures.

Tulare County Centralized Eligibility List Application

Submission of this application is not a guarantee of enrollment and it is not possible to determine how long you might wait for services. Programs enroll the most eligible children first based on need, family size and income, and admission priorities established by the California Department of Education.

Initial Application Date: _____

PRIMARY PARENT: <input type="checkbox"/> Living in the home? <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Parent Incapacitated <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Homeless <input type="checkbox"/> Asian <input type="checkbox"/> Employed <input type="checkbox"/> Black or African American <input type="checkbox"/> Seeking <input type="checkbox"/> Caucasian <input type="checkbox"/> Training <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> <input type="checkbox"/> Other		PRIMARY PARENT: <input type="checkbox"/> Living in the home? <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Parent Incapacitated <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Homeless <input type="checkbox"/> Asian <input type="checkbox"/> Employed <input type="checkbox"/> Black or African American <input type="checkbox"/> Seeking <input type="checkbox"/> Caucasian <input type="checkbox"/> Training <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> <input type="checkbox"/> Other	
Language spoken _____ <input type="checkbox"/> Speak English?		Language spoken _____ <input type="checkbox"/> Speak English?	
Relationship to Child: <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____		Relationship to Child: <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____	
Last Name, First Name: _____		Last Name, First Name: _____	
DOB: _____		DOB: _____	
Street Address: _____		Street Address: _____	
Mailing Address: _____		Mailing Address: _____	
City, State, Zip: _____		City, State, Zip: _____	
Home Phone: _____	Best to call at: Home <input type="checkbox"/>	Home Phone: _____	Best to call at: Home <input type="checkbox"/>
Cell Phone: _____	Work <input type="checkbox"/>	Cell Phone: _____	Work <input type="checkbox"/>
Message Phone: _____	Cell <input type="checkbox"/>	Message Phone: _____	Cell <input type="checkbox"/>
Work/School Information		Work/School Information	
Employer/School Name: _____		Employer/School Name: _____	
Employer Address: _____		Employer Address: _____	
City: _____	Zip: _____	City: _____	Zip: _____
Phone: _____ OK to call? <input type="checkbox"/> Yes <input type="checkbox"/> No		Phone: _____ OK to call? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Monthly Income (before taxes): \$ _____		Monthly Income (before taxes): \$ _____	
Other Income: \$ _____ /month Other Income Type: <input type="checkbox"/> TANF/Cash Aid <input type="checkbox"/> Child Support <input type="checkbox"/> Disability <input type="checkbox"/> Workers' Comp <input type="checkbox"/> Foster Care <input type="checkbox"/> Unemployment <input type="checkbox"/> SSI (Disability) <input type="checkbox"/> SSI (Survivor Benefits) <input type="checkbox"/> Other _____		Other Income: \$ _____ /month Other Income Type: <input type="checkbox"/> TANF/Cash Aid <input type="checkbox"/> Child Support <input type="checkbox"/> Disability <input type="checkbox"/> Workers' Comp <input type="checkbox"/> Foster Care <input type="checkbox"/> Unemployment <input type="checkbox"/> SSI (Disability) <input type="checkbox"/> SSI (Survivor Benefits) <input type="checkbox"/> Other _____	
Currently participating in CalWORKs activity? <input type="checkbox"/> Yes <input type="checkbox"/> No Previously participated in CalWORKs activity? <input type="checkbox"/> Yes <input type="checkbox"/> No If no longer receiving CalWORKs cash aid, list date last received _____		Currently participating in CalWORKs activity? <input type="checkbox"/> Yes <input type="checkbox"/> No Previously participated in CalWORKs activity? <input type="checkbox"/> Yes <input type="checkbox"/> No If no longer receiving CalWORKs cash aid, list date last received _____	
<input type="checkbox"/> 50% or more of family income from agricultural work? <input type="checkbox"/> Family moved during last 24 months to look for or get agricultural work? If yes, list date of last move. _____		List zip code(s) or cities where you prefer to have child care: _____ _____	

List information for **all** children living in the home.

CHILD INFORMATION		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Special Need? _____					
Last Name, First Name			DOB		IEP?	IFSP?	CWS?		
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name and Address of School, Preschool or Program attending		Grade		School District You Live In					
<input type="checkbox"/> Speak English? Language(s) spoken _____	Need: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
	<input type="checkbox"/> Hours per week vary		From						
	<input type="checkbox"/> No care needed		To						

CHILD INFORMATION		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Special Need? _____					
Last Name, First Name			DOB		IEP?	IFSP?	CWS?		
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name and Address of School, Preschool or Program attending		Grade		School District You Live In					
<input type="checkbox"/> Speak English? Language(s) spoken _____	Need: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
	<input type="checkbox"/> Hours per week vary		From						
	<input type="checkbox"/> No care needed		To						

CHILD INFORMATION		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Special Need? _____					
Last Name, First Name			DOB		IEP?	IFSP?	CWS?		
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name and Address of School, Preschool or Program attending		Grade		School District You Live In					
<input type="checkbox"/> Speak English? Language(s) spoken _____	Need: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
	<input type="checkbox"/> Hours per week vary		From						
	<input type="checkbox"/> No care needed		To						

CHILD INFORMATION		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Special Need? _____					
Last Name, First Name			DOB		IEP?	IFSP?	CWS?		
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name and Address of School, Preschool or Program attending		Grade		School District You Live In					
<input type="checkbox"/> Speak English? Language(s) spoken _____	Need: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
	<input type="checkbox"/> Hours per week vary		From						
	<input type="checkbox"/> No care needed		To						

CHILD INFORMATION		<input type="checkbox"/> Male	<input type="checkbox"/> Female	Special Need? _____					
Last Name, First Name			DOB		IEP?	IFSP?	CWS?		
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Name and Address of School, Preschool or Program attending		Grade		School District You Live In					
<input type="checkbox"/> Speak English? Language(s) spoken _____	Need: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>		<u>Mon</u>	<u>Tue</u>	<u>Wed</u>	<u>Thur</u>	<u>Fri</u>	<u>Sat</u>	<u>Sun</u>
	<input type="checkbox"/> Hours per week vary		From						
	<input type="checkbox"/> No care needed		To						

**Tulare County Centralized Eligibility List Application
Program and Provider Preferences**

Parent Name _____ Home Phone _____

Please print clearly

Depending on your circumstances, your child may be eligible for one or more of the following programs. Please indicate all programs you are interested in.

- | | | |
|--------------------------|---------------------------------------|--|
| <input type="checkbox"/> | California Alternative Payment | Licensed or exempt providers, part-time, full-time, evening, weekend and overnight care. (Birth – 12 years) |
| <input type="checkbox"/> | Center Based | Centers and family child care homes. (Birth – 12 years) |
| <input type="checkbox"/> | Early Head Start | Comprehensive child development services for economically disadvantaged children and families that promote school readiness. (Birth – 3 years) |
| <input type="checkbox"/> | Head Start (Full Day) | Comprehensive child development services for economically disadvantaged children and families that promote school readiness (3 – 5 years) |
| <input type="checkbox"/> | Head Start (Half Day) | Comprehensive child development services for economically disadvantaged children and families that promote school readiness (3 – 5 years) |
| <input type="checkbox"/> | Head Start (Home Based) | Comprehensive child development services for economically disadvantaged children and families that promote school readiness. Services are conducted in the home. (3 – 5 years) |
| <input type="checkbox"/> | Head Start (Migrant) | Comprehensive child development services for economically disadvantaged migrant children and families that promote school readiness (3 – 5 years) |
| <input type="checkbox"/> | Latchkey | Age and developmentally appropriate activities during the hours immediately before and after normal school hours and during school vacations. (School age children) |
| <input type="checkbox"/> | State Preschool (Full Day) | Services for parents who are working, training, attending school or meeting work participation requirements. (3 – 5 years) |
| <input type="checkbox"/> | State Preschool (Part Day Enrichment) | Comprehensive development programs; emphasizes parent education and encourages parent involvement. (3 – 5 years old) |
| <input type="checkbox"/> | State Migrant Family Child Care Homes | Licensed provider care for families whose income is 50% or more from agricultural work. (Birth to Kindergarten) |

Please indicate which of the participating agencies you are interested in. For more information about the services provided by each agency please call the telephone phone number listed.

- | | Preferred Center Name | |
|--|-----------------------|----------------|
| <input type="checkbox"/> Allensworth Elementary School District | _____ | (661) 849-2401 |
| <input type="checkbox"/> Burton Elementary School District (Porterville) | _____ | (559) 788-6425 |
| <input type="checkbox"/> Cutler-Orosi Unified School District | _____ | (559) 528-1790 |
| <input type="checkbox"/> Earlimart Elementary School District | _____ | (661) 849-4235 |
| <input type="checkbox"/> Family FOCUS (Porterville) | _____ | (559) 784-2214 |
| <input type="checkbox"/> Gingerbread House (Exeter) | _____ | (559) 594-5566 |
| <input type="checkbox"/> Gingerbread House (Visalia) | _____ | (559) 627-5566 |
| <input type="checkbox"/> Lindsay Unified School District | _____ | (559) 562-8524 |
| <input type="checkbox"/> Palo Verde Union Elementary School District | _____ | (559) 688-0648 |
| <input type="checkbox"/> Porterville Children's Center | _____ | (559) 782-7120 |
| <input type="checkbox"/> Richgrove Elementary School District | _____ | (661) 725-2092 |
| <input type="checkbox"/> Strathmore Union Elementary School District | _____ | (559) 568-0007 |
| <input type="checkbox"/> Tulare County Office of Education Child Care Program (Head Start) | _____ | (559) 651-3022 |
| <input type="checkbox"/> Tulare County Office of Education Child Care Program (C4QC) | _____ | (559) 651-3026 |
| <input type="checkbox"/> Visalia Unified School District | _____ | (559) 730-7564 |
| <input type="checkbox"/> Woodlake Union Elementary School District | _____ | (559) 564-1801 |
| <input type="checkbox"/> YMCA | _____ | (559) 627-0700 |