

JARRELL INDEPENDENT SCHOOL DISTRICT

PREKINDERGARTEN (PRE-K) ELIGIBILITY

Student Name: _____ DOB: _____ Age (as of 9/1/25): _____

To be eligible for Prekindergarten, a child must be 4 years of age on September 1, 2025, and meet one of the following requirements*:

_____ Be unable to speak and comprehend the **English language**

- [Home Language Survey](#) and
- Proof of Oral Language Proficiency Test (campus will complete before the start of school)

_____ Be **educationally disadvantaged** (eligible in the National School Lunch Program)

*Registrars send all student names to Tanya Edgar for review of eligibility. Edgar will e-mail the Registrar with the determination. Eligibility may be reviewed before July 1 with the prior year form, however **current year application must be complete before enrolling in a class. Eligibility is pending until final review with the current year NSLP application.**

- [NSLP Application](#) or
- Federal Assistance Programs (may use household members' credentials - Food Services will verify.)
 - Medicaid EDG # _____
 - SNAP EDG # _____
 - TANF EDG # _____

_____ Be homeless per **McKinney-Vento Act** (lack a fixed, regular, and adequate nighttime residence)
[Student Residency Questionnaire](#)

_____ Be the **child of an active duty member** of the armed forces of the United States.

- Verify the student's US DoD photo ID for children of active duty service members (do not copy), or
- A statement of service

_____ Be the **child of a member of the armed forces** of the United States who was injured or killed while serving on active duty

- Copy of the death certificate using the service-appropriate DoD form, or
- Copy of DoD form that indicates death as the reason for the separation from service, or
- Copy of Purple Heart orders or citations for children, or
- Copy of the line of duty determination documentation for children, or
- Documentation that a service member is MIA

_____ Has ever been in the conservatorship of the **Texas Dept. of Family Protective Services**

- Documentation may include DFPS Placement Authorization Form 2085, DFPS Designation of Education Decision Maker Form 2085-E, or a court order.

_____ Has been in **foster care** in another state or territory

- Official documentation such as redacted court orders or official paperwork from state or regional child welfare

_____ Is a child of a person eligible for the **Star of Texas Award**

- [Criminal Justice Division - Past Honorees](#)
- Certificate of Resolution, if the current year

_____ Is a child of a **JISD employee** and does not meet the criteria above

- JISD employees must complete the Employee Pre-K Packet
- Maria Cuellar will alert the Registrar when approved for enrollment

DETERMINATION OF ELIGIBILITY by Campus Administrator

_____ Approved: I verify the qualifying documentation has been reviewed and is retained in the student's official cumulative folder for auditing purposes.

_____ Not Approved: The student does not meet the eligibility requirements for enrollment in the JISD PreK Program.

Signature of Campus Administrator

Date Verified