

Doña Ana County Head Start Eligibility Determination



Center: _____

In-person Interview Conducted: Yes No

If no, Explain: _____

Head Start Early Head Start Home Based

<input type="checkbox"/> Age Eligibility- Child Information			
Name			
DOB:	Age: Yrs. _____ Mths. _____	Age verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Which of the following documents was used to verify the child's age:			
<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Baptismal Certificate	<input type="checkbox"/> Passport	<input type="checkbox"/> Hospital record

<input type="checkbox"/> Categorical Eligibility		
<input type="checkbox"/> Homeless	<input type="checkbox"/> Foster	Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Income Eligibility			
Which of the following most accurately reflects the family's current income (Select one):			
<input type="checkbox"/> Past 12 months: Income or employment has changed over the past year			
<input type="checkbox"/> Previous calendar year: Family has had consistent income from the same employer for the past year			
Income Verification Documents used:			
<input type="checkbox"/> Check Stubs	<input type="checkbox"/> Tax Return	<input type="checkbox"/> Unemployment	<input type="checkbox"/> Written Employer Statement
<input type="checkbox"/> Scholarships	<input type="checkbox"/> Financial Aid	<input type="checkbox"/> TANF	<input type="checkbox"/> Declaration of No Income
<input type="checkbox"/> Child Support	<input type="checkbox"/> SSI	<input type="checkbox"/> 1-20 Form	<input type="checkbox"/> Other:

