

Site(s): _____

Family Size: _____

**Highland Rim Head Start Selection Criteria
2020/2021**

Child's Name:		Annual Income:	
Criteria	Points	Assigned Points	
INCOME			
Foster Child (Top Priority)	999		
Experiencing Homelessness (Top Priority)	999		
Public Assistance (TANF/SSI)	500		
Income 0-100% of Poverty Guidelines	500		
Income 100%-130% of Poverty Guidelines	300		
Over Income	0		
AGE			
Three years old	500		
Four years old	300		
PIR age under three	0		
Family Type			
One Parent Family	80		
Two Parent Family	60		
Someone other than Parent as Guardian	100		
DISABILITY <small>HSM manager approval required - HSM initials</small>			
Diagnosed Disability with IEP or IFSP	500		
Suspected Disability	100		
OTHER FACTORS			
Open DCS Case	100		
Referral from TEIS or other Service Agency	80		
Family in Crisis	60		
Family in Transition	60		
Unemployed (Actively seeking Employment)	40		
Needs Childcare (Currently working or enrolled in school/training)	40		
Primary Language other than English	40		
Chronic Health Condition (Parent or Child) <small>(Specify in comments)</small>	20		
Parent or Guardian Active Military or Veteran	20		
Sibling currently in Head Start	10		
Total Points			
Child Plus Total Points			

Age and Income Points are Calculated by Child Plus Automatically

Comments: _____

Verifying Staff Signature: _____

Date: _____