



Siskiyou  
Early Head Start

*Siskiyou Early Head Start provides child development services to income eligible children ages 0 to 3 years and their families at no cost.*

## Parent Interest Form

Parent/Caregiver name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Services requesting:  Center Based  Home Based  Prenatal

Name of child: \_\_\_\_\_

Child's date of birth: \_\_\_\_\_

Expected due date (prenatal): \_\_\_\_\_

*Upon receipt of this form, you will be contacted by the SEHS Family Service Worker to begin the application process. During the application process, the following will be required:*

- **Proof of Income** (Examples include – Income tax form 1040, W-2, Unemployment, Written statements from employers, TANF documentation, 12 months of pay stubs or pay envelopes, Foster care reimbursement, SSI documentation, Documentation of no employment)
- **Birth record** (Examples include – Birth certificate, immunization records, hospital records, court documents, or TANF documentation)

*Please return the interest form to:*

**Siskiyou Early Head Start**  
**Attn: Family Service Worker**  
**1 Childs Way**  
**Yreka, CA 96097**  
Phone: (530) 842-8493  
Fax: (530) 842-8477

Date Received: \_\_\_\_\_