INTENT TO REGISTER – KINERGARTEN AGE ELIGIBLE
Transition from Preschool Early Intervention to School Age Program

Child’s Name _____________________________________ Date of Birth _______________
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Child’s Name:__________________________________ Date Sent/Given to Parent/Guardian:________
Date Received from Parent/Guardian:_____________
Date Sent/Given to School District or Charter School:________

Name and Address of Parent/Guardian/Surrogate:

Dear __________________________

By completing this form you are documenting for transition planning purposes your intention to register your child in your school district or a charter school. Within a reasonable period of time from the receipt of this completed form, your school district or charter school will proceed with the transition process to determine your child’s continued eligibility for special education services in order to have your child’s Individualized Education Program (IEP) in place by the beginning of the school year.

MY INTENTION TO REGISTER MY CHILD FOR SCHOOL:
CHILD WHO IS KINDERGARTEN AGE ELIGIBLE
Your child is age eligible for kindergarten in your school district.

DIRECTIONS FOR PARENT/GUARDIAN/SURROGATE: Please check 1, 2 or 3 below to indicate your intention to register your child. Note that registering with your school district or a charter school does not affect the option for your kindergarten age eligible child to remain in the preschool early intervention program.

1. ☐ I currently intend to register my child in my school district or charter school for the next school year. I understand there are several options the school district or charter school team could proceed with my child’s transition. I understand that, within a reasonable period of time from the receipt of this signed form, the school district or charter school will notify me in writing and initiate the transition process. I understand that my child’s educational records will be provided to my school district or charter school. I also understand that in order to receive special education services in a public school my child must be determined eligible and enrolled in the school district or charter school.

2. ☐ I currently DO NOT intend to register my child in my school district or a charter school. Instead, I want my child to remain in the preschool early intervention program for the next school year. I understand that directory information (such as my child’s name and birthdate and my name, address, and phone number) will be provided to my school district.

3. ☐ I DO NOT intend to enroll my child in kindergarten.

SIGN HERE:

Parent/Guardian/Surrogate Signature __________________________ Date ________________ Daytime Phone __________________________

Early Intervention Program, Revised February 2014
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If you have any questions regarding the transition process for your child, please contact your school district:

School District of Residence:

Special Education Director/Designee:

Special Education Office Phone:

PLEASE RETURN THIS ENTIRE FORM TO:

Name:

Address:

A copy of the Procedural Safeguards Notice explaining your rights is available upon request from your child’s school.

For help in understanding this form, an annotated Intent to Register – Kindergarten Age Eligible form is available on the PaTTAN website at www.pattan.net. Type "Annotated Forms" in the Search feature on the website.