

# Alief PK Partnership Application Form

If you are interested in applying for a public/private partnership with Alief ISD, please fill out the form below. Private child-care centers applying for consideration must be nationally accredited; or Texas Rising Star program 3 or higher; or Head Start; and participate in the Alief Texas School Ready Program. If you have any questions about the application process, please contact the Early Childhood Department at 281-498-8110 ext. 29128. All applications must be filled/received by Tuesday, January 7th, 2020.

\* Required

1. Name of Child Care Center \*

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2. Name of Owner of Child Care Center \*

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3. Name of Director (if different from Owner)

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4. Licensing Number \*

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5. Address of Child Care Center (including city, state, zip code) \*

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6. Phone number of Child Care Center \*

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7. Fax number of Child Care Center (if applicable)

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8. Are you a nationally accredited, a Head Start program, or Texas Rising Star program 3 or higher? Please specify. \*

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9. Total number of students in your Child Care Center \*

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10. What is your center's total capacity for PK (4 year olds) \*

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11. How many 4 year-old classrooms do you currently have? \*

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12. How many total 4 year-old students do you currently have? \*

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13. How many 4 year-old students that you currently have would be eligible through TEA's PK eligibility criteria ([https://tea.texas.gov/Academics/Early\\_Childhood\\_Education/Eligibility\\_for\\_Prekindergarten](https://tea.texas.gov/Academics/Early_Childhood_Education/Eligibility_for_Prekindergarten))

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14. Are you in good standing with Family Protective Services? \*

*Mark only one oval.*

- Yes
- No

15. Are you currently participating in the Alief Texas School Ready partnership? \*

*Mark only one oval.*

- Yes
- No

16. What curriculum do you currently use in your PK 4 year-olds classrooms? \*

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17. Do you have a certified teacher, or would the district need to provide one? \*

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18. **Would you be able to provide classroom aides (assistant teachers) for the partnering PK classroom? \***

*Mark only one oval.*

- Yes  
 No  
 Maybe

19. **Does your center provide an appropriate outdoor space and/or playground equipment? \***

*Mark only one oval.*

- Yes  
 No

20. **Can you provide services for the 75,600 operational minutes for the year (following Alief ISD's school calendar)? \***

*Mark only one oval.*

- Yes  
 No  
 Maybe

21. **Name of contact person \***

22. **Cell phone number of contact person \***

Please mail your application to:  
Early Childhood Department, Instruction  
Alief Independent School District  
4250 Cook Rd  
Houston, TX 77072