STATE OF HAWAII – DEPARTMENT OF HUMAN SERVICES

Benefit, Employment and Support Services Division

PRESCHOOL OPEN DOORS INSTRUCTION SHEET AND DOCUMENT CHECKLIST FOR APPLICATION

<u>REQUIRED DOCUMENTS</u>--The following documents are required to determine eligibility. Enclose COPIES of these documents with your signed application. Please note that INCOMPLETE applications CANNOT BE PROCESSED and WILL BE DELAYED.

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☐ APPLICATION

- Family Information <u>Do not</u> list other adult relatives in the home such as grandparents, aunts, uncles, and/or cousins unless they are the primary caretaker(s) for the child or are financially responsible for the child.
- Be sure to specify the relationship of family members to the child.
- Also include the social security numbers for each family member listed on the application.
- Please indicate if the child you are applying for is a foster child on the application.
- If this is a foster child, please include the appropriate legal documentation (DHS 1591B form and DSSH 1508 form).
- Parent(s) or Guardian(s) must sign and date application form. In (2) parent households, both parents must sign.

☐ BIRTH CERTIFICATE

• The Birth Certificate needs to be issued from the Department of Health, or other state's vital statistics agency if the child was not born in Hawaii. Please contact the Department of Health at 586-4533 to request a Hawaii birth certificate.

□ SOCIAL SECURITY CARDS*

- Send a copy for EVERYONE listed in the Family Information section of the application.
- If you need to request a card, please call the Social Security Administration at 1-800-772-1213.
- If choosing to provide social security numbers and cards, please provide for each family member on the listed on the application

□ PAY STUBS

- Send copies of pay stubs covering (pay dates for) the <u>last ONE or TWO CONSECUTIVE MONTHS</u> (or at least (4) or (8) consecutive weeks, and pay stubs must show the respective pay dates and pay periods) for <u>ALL</u> listed on the application
- If you started a new job a letter from your employer, specifying start date, hourly wage, hours worked per week, pay periods and your gross monthly earnings will be accepted.
- Gross monthly income will be used to determine eligibility.

IF APPLICABLE:

☐ SPECIAL POPULATIONS PRIORITY REFERRAL FORM

- If applicable, the **Special Populations Priority Referral Form** must be completed by a professional familiar with your child and/or the family situation, such as a pediatrician, public health nurse, social worker, counselor or therapist.
- Your child <u>will not</u> be considered for a Special Populations Priority <u>without</u> a completed <u>Special Populations</u> <u>Priority Referral Form.</u>

SELF EMPLOYMENT (contact PATCH POD at Oahu: (808) 791-2130 or Toll Free: 1-800-746-5620 for more information and to be mailed the required forms

- Send a copy of your General Excise Tax License.
- If you have business expenses, copies of receipts must be submitted to determine eligibility.

☐ OTHER DOCUMENTS

• Send verification of State of Hawaii financial assistance, Social Security benefits, SSI, Unemployment insurance benefits, Veteran's benefits, workers' compensation, child support and/or alimony, Temporary Disability Insurance (TDI).

Thank you for your interest in the Preschool Open Doors Program. Please **complete**, **sign**, **and mail/fax/email** the enclosed **Preschool Open Doors Application** with **ALL** required documents to:

Preschool Open Doors

PATCH – Attn. Applications Department 560 N. Nimitz Hwy, Ste. 218 Honolulu, HI 96817 or fax to (808) 694-3066 or email: PODAdmin@patch-hi.org