## **Washington Requirements**

Students must complete a registration form and provide specific health documents before they can start attending our preschool each year. The registration forms ensure we capture information to provide students a safe learning environment as well as comply with all licensing requirements. If offered a seat, please be prepared to provide the following:

Health and Medical Information
• Required
□ Ensure your child is up to date on the following vaccine-preventable diseases, or provide proof of exemption:  *Here are the state specific immunization guidelines for Washington - School and Child Card Immunizations Information for Families   Washington State Department of Health  ■ Diphtheria, Tetanus, Pertussis (DTaP/DT)  ■ Polio (IPV)  ■ Measles, Mumps, Rubella (MMR)  ■ Hepatitis B  ■ Haemophilus influenzae type b (Hib)  ■ Varicella (Chickenpox)  ■ Pneumococcal bacteria (PCV)
Required if applicable to your child
□ Individual Care Plan (ICP) signed by a health care provider (ICP's are required if your child has an allergy, food intolerance, or other medical condition that could require care while attending Bezos Academy) □ Individualized Education Plan (IEP) or Individual Family Service Plan (IFSP) □ Certificate of immunization exemption with health care provider's signature □ Medication Authorization Form (required if your child has any prescribed medications, including for continuous, long-term use, that will need to be administered during the school day) □ AAP Allergy and Anaphylaxis Emergency Plan (required if your child has a life-threatening allergy)
Date of Birth Verification
Provide one of the following:
<ul> <li>□ Birth certificate</li> <li>□ Health records with date of birth displayed</li> <li>□ Photo of passport with date of birth displayed</li> <li>□ Photo of identification card with date of birth displayed</li> </ul>
Income Verification
Fither provide proof of participation in one of the following programs:

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☐ Food Assistance Program (FAP)

	<ul><li>☐ Women, Infants and Children (WIC) Program</li><li>☐ Temporary Assistance for Needy Families (TANF) Program</li><li>☐ Supplemental Security Income (SSI) benefit</li></ul>
•	Or provide one of the following as proof of your family income for all working members of the family:
	$\square$ Pay stubs (two most recent, consecutive)
	☐ Tax return (most recent)
	☐ W2-Wages and tax statement (most recent)
	$\square$ Employer letter stating the total gross income from the last 12 months