



Berkeley's Excellent Academic Road to Success
BEARS PROGRAM APPLICATION

Please Complete All Information and Write Legibly. Thank you.

Date: / /

Applicant/Parent/Guardian(s) Name:

Mailing Address (street, city, zip) (ATTACH UTILITY BILL)

Telephone Number: Cell Phone Number:

Email Address:

Estimated Gross Monthly Income (ATTACH PROOF OF INCOME): \$

Family Size: (ATTACH BIRTH CERTIFICATES) Adults: Children:

Reason for Needing the BEARS Program:

- Employed/Self Employed
Participating in a vocational training program leading directly to trade or profession/Attending College
Incapable of providing supervision for part of the day or most of the day due to a physical or mental health condition
Child is at risk of abuse, neglect, or exploitation/receiving child protective services
Seeking Permanent Housing/Seeking Employment (applicable for summer care only)

Child's First and Last Name:

1. Which Berkeley school is your child registered to attend for the upcoming/current school year?

2. Have you also applied to the LEARNS program at your child's school? Yes No

3. Is this child enrolling in the Berkeley Unified School District for the first time? If so, which grade level will he/she be entering into? Please check one of the following:

- Transitional Kindergarten Kindergarten Grade

4. Did your child attend one of the following three preschools in Berkeley? Please check if applicable:

- Franklin Preschool Hopkins Preschool King Preschool

If there are siblings in the BEARS Program, please list each child's first and last name.

If you would like your other children to attend the BEARS Program, please list their grade level and school.

Name: Grade: School:

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When would you like your child(ren) to attend the BEARS Program? (Check all that apply)

- Before School Begins (7am-9am) After School Winter Break (5 days) Spring Break (4 days)
Summer **** How many days per week will you need services? Monday through Friday or
Less than 5 days per week

*****Please return this application to 1810 Hopkins Street, Berkeley, CA 94707*****

OFFICE USE ONLY: Date Received: Ranking #: