

# 2011 Hillsborough Summer

## VPK



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## All About Summer VPK

### WHAT IS THE SUMMER VPK PROGRAM?

The Summer VPK Program is a **FREE**, voluntary, 300 instructional- hour program designed to prepare Florida's 4-year-olds for successful entry into kindergarten.

### WHO IS ELIGIBLE FOR THE 2011 SUMMER VPK PROGRAM?

Children who reside in Florida and turned 4 years of age by September 1, 2010 (*born September 2, 2005 to September 1, 2006*) who did not use a VPK Certificate during the 2010-2011 School Year may participate in 2011 Summer VPK. Parent's unsure of their child's eligibility should call 813-202-1000 to verify before going to register.

### WHERE IS SUMMER VPK?

In Hillsborough County, the 2011 Summer VPK Program is delivered at 20 elementary schools and by a select number of approved private child care providers. A list of schools and private providers are contained on the following pages of this packet. Parents decide where their child attends the program!

### HOW DO I ENROLL MY CHILD IN THE SUMMER VPK PROGRAM?

Parents or legal guardians **MUST** (1) complete a VPK Child Enrollment Form, (2) provide proof of the enrolling child's age and proof of residency in the State of Florida with a current address, and (3) take these items to a VPK enrollment location to receive a VPK Certificate of Eligibility.

Details on what serves as acceptable proof of age and proof of residency is on the following pages. Enrollment **must** be completed in person. Enrollment **may not** be completed online, by mail, at a private child care center or by telephone.



### WHAT WILL SERVE AS PROOF OF AGE?

Parents/legal guardians must provide proof that the enrolling child is age-eligible. A copy of any **ONE** of the following will serve as proof of age:

- Certified birth record or certificate
- A valid passport
- A certificate of arrival in the US showing age
- A valid military dependent ID card
- A certified copy of baptism or religious record with affidavit
- A shot/immunization record indicating the date of birth signed by a public health officer or practicing physician

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## WHAT WILL SERVE AS PROOF OF RESIDENCY?

Parents/Legal Guardians must provide proof that they are residents of the state of Florida. Any ONE of the following with a current address on it will serve as proof of Florida residency:

- A Florida driver's license
- A Florida identification card
- A utility bill
- A pay stub
- Property tax assessment showing homestead exemption
- Residential rental agreement or receipt from rental payment
- A military order showing the child's parent is a service member in the United States Armed Forces and is assigned to duty in Florida when the child attends the VPK program.

**Beginning April 4, 2011**, parents/legal guardians may also register for 2011 Summer VPK at the these elementary school sites. Registrations will only be accommodated during regular school hours and parents should call the school for the best time register.

# 2011 Summer VPK PUBLIC SCHOOL SITES



Parents/legal guardians may choose from the following elementary school locations for the 2011 Summer VPK Program. In elementary schools, Summer VPK begins Monday, June 20, 2011 and ends Wednesday, August 10, 2011 and is held Monday - Thursday, closed on Fridays. The program day will begin at 7:30 a.m. and end at 6:00 p.m. *(Listing updated 06/16/11)*

Elementary School Name	Address	City	Zip Code	School Main Phone Number
Bailey	4630 Gallagher Road	Dover	33527	707-7531
Bing	6409 36th Avenue South	Tampa	33619	872-5387
Buckhorn	2420 Buckhorn School Court	Valrico	33594	744-8240
Chiles	16541 Tampa Palms Boulevard W.	Tampa	33647	558-5422
Claywell	4500 Northday Blvd.	Tampa	33624	975-7300
Cork	3501 N. Cork Road	Plant City	33565	757-9353
Crestwood	7824 North Manhattan Avenue	Tampa	33614	872-5374
Cypress Creek	4040 19th Avenue N.E.	Ruskin	33573	671-5167
Egypt Lake	6707 N. Glen Avenue	Tampa	FL 33614	671-5100
Frost	3950 Falkenburg Road	Riverview	33578	740-4900
Gorrie	705 De Leon St	Tampa	33606	276-5673
Just	1315 Spruce Street	Tampa	33607	276-5708
Mango	4220 Highway 579	Seffner	33584	744-8211
Mitchell	205 Bungalow Park	Tampa	33609	872-5216
Potter	3224 East Cayuga	Tampa	33610	276-5564
Shaw	11311 North 15th Street	Tampa	33612	975-7366
Sheehy	6402 North 40th Street	Tampa	33610	233-3800
Sulphur Springs	8412 13th Street	Tampa	33604	975-7305
Summerfield	11990 Big Bend Road	Riverview	33569	671-5115
Tinker	8207 Tinker Street	MacDill AFB	33621	840-2043

# 2011 Summer VPK PRIVATE PROVIDERS



Parents/legal guardians may also choose from approved VPK private providers for the 2011 Summer VPK Program. Parents should check with individual private providers regarding the times and start and end dates of their 2011 Summer VPK Programs.

This list was last updated on Tuesday, June 22, 2011. It will be updated as new providers may be approved and added to the list— so check back often at [www.elchc.org](http://www.elchc.org).

PROVIDER/CENTER NAME	CONTACT	ZIP	PHONE	FAX
Barrington Academy 5595 W. Lutz Lake Fern Road Lutz	Darcy Dobbie	33558	792-1446	792-1446
<b>Children's Academy</b> 506 Limona Road Brandon	Debra Sterling	33510	689-6820	200-1615
<b>Circle C Ranch Academy</b> 6204 Interbay Boulevard Tampa	Sally Harris	33611	831-8429	831-9717
<b>College Hill COGIC Preschool</b> 1002 E. Martin Luther King Blvd. Tampa	Deloris Davis	33603	231-8562	231-8569
<b>Creative World - A Child's Adventure</b> 5931 Frond Way Apollo Beach	Charlene Wiggins	33572	649-1820	645-9138
<b>Cynthia Chipp FCCH</b> Tampa	Cynthia Chipp	33612	632-3229	866-4269
<b>Family of Christ</b> 16190 Bruce B. Downs Tampa	Jill Hammond	33647	558-9343	514-0453
<b>First Discoveries Child Development Center</b> 4003 S. Manhattan Avenue Tampa	Cindy McConnell	33611	831-8085	NA
<b>Fishhawk Early Learning Center II</b> 6001 Parkset Drive Lithia	Susan Rind	33547	684-5506	684-5507
<b>Gabrielle's Glen</b> 8801 N. 78th Street Tampa	Sandra Dudley-Price	33637	985-0019	422-5295
<b>Hand in Hand Academy</b> 207 W. Lutz Lake Fern Road Lutz	Wendy Alexander	33548	949-3367	949-3597
<b>Humpty Dumpty Academy</b> 1211 Wishing Well Way Tampa	Bandi Dutchak	33619	621-9858	621-9858

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<b>PROVIDER/CENTER NAME</b>	<b>CONTACT</b>	<b>ZIP</b>	<b>PHONE</b>	<b>FAX</b>
<b>Kids Clubhouse</b> 4901 N. Habana Avenue Tampa	Cynthia Rodriguez	33614	876-7151	414-9020
<b>Kids Community College</b> 10544 Lake St. Charles Boulevard Riverview	Vandrese Williams	33578	671-0828	671-0251
<b>Kids R Tops</b> 215 Kingsway Road Brandon	Vicki Brown	33510	654-2868	654-2868
<b>La Petite Academy</b> 1011 Greenhollow Lane Valrico	Kimberly Sewell	33596	684-3528	684-3796
<b>La Petite Academy</b> 7511 Paula Drive Tampa	Sandra Clark	33615	885-2215	885-7418
<b>MacDill AFB Child Development Ctr. 2</b> 1904 Golf Avenue MacDill AFB	Maria Medina	33621	828-2205	828-2475
<b>Miss Funmis Day Care Center, Inc., II</b> 2709 N. Tampa Street Tampa	Funmilayo Akinrefon	33602	221-1314	NA
<b>Panda Hugs Learning Center</b> 8643 Gunn Highway Odessa	Andrea Driscoll	33556	926-5742	926-4712
<b>Primavera Preschool</b> 13601 W. Hillsborough Avenue Tampa	Elsa Cruz	33635	855-6718	855-6716
<b>Primrose School of Tampa Palms</b> 5307 Primerose Lake Circle Tampa	Zahira Gibson	33647	975-4000	615-1260
<b>Temple Terrace Presbyterian Weekday School</b> 420 Bullard Parkway Temple Terrace	Carrie Gassen	33617	988-3038	989-9898
<b>The Learning Center at St. John</b> 4110 N. McDill Avenue Tampa	Dianne Patterson	33607	872-6826	875-3725
<b>The Peacocks Plume</b> 1094 Bloomingdale Avenue Valrico	Wanda Ritchie	33596	684-0700	NA
<b>The Riverview Montessori at Rivercrest</b> 11520 Ramble Creed Drive Riverview	Lisa Auza	33769	741-3300	741-7711
<b>The Brandon Montessori School at River Hills</b> 4226 Lynx Paw Trail Valrico	Laurie Black	33794	655-9300	654-4622
<b>Walden Lake Early Learning Center</b> 2730 Turkey Creek Road Plant City	Cynthia M. Eason	33566	752-7008	754-3957

# Where to Enroll for VPK

Enrollment for VPK **MUST** be done in person at any of the locations listed below. Parent's may NOT register by fax, e-mail, mail, online, or at a private child care facility.

## Early Childhood School Readiness Programs - Plant City Office

701 Tillman Place, Plant City, FL 33566  
Monday & Thursday  
9:00 a.m. - 4:00 p.m.  
(Closed from noon - 1:00 p.m.)

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## Early Childhood School Readiness Programs North Tampa Office

9309 North Florida Avenue - Suite 104, Tampa, FL 33612  
Monday - Thursday 8:00 a.m. - 4:30 p.m. Friday 8:00 a.m. - Noon  
(813) 915-3200

Beginning Monday, June 13, 2011 to August 4, 2011  
Monday - Thursday 7:30 a.m. - 5:30 p.m. Friday Closed June 17,  
2011 - August 5, 2011

\*Week of July 5, 2011 - July 8, 2011:  
Monday-Closed, Tuesday - Thursday 8:00 a.m. - 4:30 p.m.  
Friday 8:00 a.m. - Noon

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## Early Childhood School Readiness Programs - Bay Plaza Office

9325 Bay Plaza, Suite 210, Tampa, FL 33619  
(813) 740-4713, press 3  
Monday - Thursday 8:00 a.m. - 4:30 p.m. Friday 8:00 a.m. - Noon

Beginning Monday, June 13, 2011 to Thurs., August 4, 2011  
Monday - Thursday 7:30 a.m. - 5:30 p.m. Friday Closed  
June 17, 2011 - August 5, 2011 Open on Fridays 8:00 a.m. - Noon

\*Week of July 5, 2011 - July 8, 2011:  
Monday-Closed, Tuesday - Thursday 8:00 a.m. - 4:30 p.m.  
Friday 8:00 a.m. - Noon

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## The Early Learning Coalition of Hillsborough County

The Children's Board of Hillsborough County Bldg.  
1002 E. Palm Avenue, Suite 100, Tampa, FL 33605  
(813) 202-1000

Mondays Only 9:00 a.m. - 4:00 p.m.

Beginning Friday, June 17, 2011 - August 5, 2010  
Fridays Only 9:00 a.m. - 4:00 p.m.

# VPK Enrollment Checklist

- I have determined that my child is age eligible for the 2011 Summer VPK Program
- I have proof of my child's age/date of birth
- I have proof of my Florida residency with a current address
- I have completed the VPK Child Application Form
- I have gone to a VPK registration location with all of the above information and have received my VPK Certificate of Eligibility
- I have selected a Public School Site or Private Child Care Provider VPK Program to send my child to.
- I have given my VPK Certificate of Eligibility to my selected VPK Program location

**Your enrollment is now complete!**



**I. CHILD AND PROGRAM INFORMATION**

Type or print in black or blue ink

To be eligible for the VPK program, a child must be 4 years old, but not yet 5 years old, on September 1st.

1. VPK program year	2. Preferred program schedule (check one): <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">School-year program (540 hours):</td> </tr> <tr> <td><input type="checkbox"/> School year</td> <td><input type="checkbox"/> Winter/spring only</td> </tr> <tr> <td><input type="checkbox"/> Fall/winter only</td> <td><input type="checkbox"/> Summer program (300 hours)</td> </tr> </table>	School-year program (540 hours):		<input type="checkbox"/> School year	<input type="checkbox"/> Winter/spring only	<input type="checkbox"/> Fall/winter only	<input type="checkbox"/> Summer program (300 hours)	3. Preferred program setting: <input type="checkbox"/> Private provider (child care, private school, faith-based) <input type="checkbox"/> Public school
School-year program (540 hours):								
<input type="checkbox"/> School year	<input type="checkbox"/> Winter/spring only							
<input type="checkbox"/> Fall/winter only	<input type="checkbox"/> Summer program (300 hours)							
4. Child's first name	Middle name	Last name	Jr./III	5. How did you hear about VPK? <input type="checkbox"/> Television <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> Other				
6. Date of birth (mm/dd/yyyy)	7. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	8. Social security number <sup>1</sup> ----- DO NOT NEED -----		9. Primary spoken language				
10. Home address (number and street)								
11. City		12. County	13. State <b>FLORIDA</b>	14. ZIP+4 Code				
15. In which county do you wish your child to receive VPK services?		16. Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	17. Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian	<input type="checkbox"/> Black or African American <input type="checkbox"/> Hawaiian or Other Pacific Islander <input type="checkbox"/> White				

<sup>1</sup> NOTE.—See the Privacy Act Statement concerning social security numbers in the instructions accompanying this application.

**II. PARENT OR GUARDIAN INFORMATION**

18. <input type="checkbox"/> Mr.    First name		Middle name	Last name	Jr./Sr./III
<input type="checkbox"/> Ms.				
19. Parent's or guardian's home address (number and street)				<input type="checkbox"/> Same as child's address
20. City		21. County	22. State	23. ZIP+4 Code
24. Relationship to child	25. Daytime telephone	26. Home telephone	27. Email (optional)	
Other parent or guardian (if applicable)				
28. First name	Middle name	Last name	Jr./Sr./III	29. Relationship to child
				30. Home address of other parent or guardian: <input type="checkbox"/> Same as child's address

**III. OTHER EARLY LEARNING PROGRAMS (optional)**

Your family may be eligible for other early learning programs or services for you and your children, from infants through school-age, including full-day school readiness services, resource and referral, Florida Kid Care, and social services.

31. Would you like to receive information about other early learning programs or services? (check one)     YES     NO

**IV. CERTIFICATION**

I have examined this application and, to the best of my knowledge and belief, the information provided is true and correct. If I enroll my child in the VPK program, I understand that my child will be required to participate in the statewide kindergarten screening to determine readiness for kindergarten. I understand that transportation for the program is my (parent's or guardian's) responsibility. I also understand that it is my responsibility to locate an eligible VPK provider or school and enroll my child with the provider or school. I understand that I may enroll my child in either a school-year program (540 instructional hours) or a summer program (300 instructional hours). I further understand that I (parent or guardian) must follow the provider's or school's attendance policy and verify my child's attendance each month.

32. Parent or guardian signature	33. Date
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<b>OFFICIAL USE ONLY</b>			
Process agent	Date	Process manager	Date
		DOB verification _____	
		Residency _____	
		Parent signature _____	
		Child eligibility _____	