

Early Childhood Endowment Intake Form

Mother or Guardian Name				Date			
Father or Guardian Name							
3. Name of Child (ren) Served		Age at Intake		Date of Birth	Sex		
3a		·			М	F	
3b					М	F	
3c						F	
Primary home address							
Primary phone number							
Parent Educator/Teacher							
Parent Educator/Teacher phone number							
Endowment Site Name							
 4. Child's race? (please check only one) a) White, non-Hispanic b) Black / African American c) Hispanic or Latino d) American Indian / Alaska Native e) Asian American f) Native Hawaiian or Pacific Islander g) Multiple ethnicities h) Other 	5. Marital structure of the home in which the child resides most of the time (please check only one) a) married b) divorced c) single, never married d) separated e) widowed f) with partner / not married						
 6. What language is spoken most frequently in the chi 7. What is the highest level of education that the pare F-father next to the appropriate choice). For exam completed 10th grade and F on the line before high 	ent/guard	lian has <i>c</i> o e M on the	ompleted line bef	f? (Please write M - ore 10 th grade if the	mother mothe	and r	
b) less than 8 th grade c) 9 th grade d) 10 th grade e) 11 th grade	j k l) n	l) four year college degrees m) some graduate college coursework					
8. Is the family eligible for free or reduced lunch?	Y	es	No	Free or Reduced	d?		
9. Is the child premature (36 weeks GA or less)?	Y	es	No				
10. Are you a teen parent? Yes	_ No						
11. Does the child have a parent who is incarcerated	?	Yes		No			