Site Name:

1. Participant Information (to be completed by parent/guardian)

Last Name	First Name	Birthdate	OPTIONAL Ethnicity (Circle One for each participant) H: Hispanic NH: Non-Hispanic		<u>OPTIONAL</u> Race (List the race/races tha for each participal Examples include: Black or African American; White Hawaiian or other Pacific Islander Indian or Alaskan Native; Asian	nt) ; Native	Circle all meals eater while in care*
			н	NH			B AM L PM S LN
			н	NH			B AM L PM S LN
			н	NH			B AM L PM S LN
			н	NH			B AM L PM S LN
* B-Breakfast AM-AM Snack L-Lunch PM-PM Snack S-Supper LN-Late Night Snack							e Night Snack

Printed Name

2.

Parent/Guardian Signature

Address

Phone Number

Alternate Phone Number

Date

USDA Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity. Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. To file a program discrimination complaint, a Complainant should complete the <u>USDA Program Discrimination Complaint Online Form</u> (AD-3027) found online at <u>How to file a Complaint</u>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by: Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (833) 256-1665 or (202) 690-7442; or (3) email: program.intake@usda.gov. This institution is an equal opportunity provider.

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Head Start Eligibility Documentation on File							
Signature of Determining Official	Date						
□ Participant Withdrew from Program on (date):							