

**Pre-K and Kindergarten
Parent Information Form
2020 - 2021**



Please provide the following information for use by the Dade County School Nutrition Program.

Child's Name _____ **Date** _____

Does your child have brothers/sisters already in school?

___ YES

___ NO

Do any of your children receive Free or Reduced meals this school year?

___ YES

___ NO

If yes, please list all children here:

Name	Grade	School