



Early Kindergarten Entrance Appeal Process  
2019-2020

The State of Indiana has established that a student must be at least five years of age on or before August 1 in order to enroll in public school kindergarten. Madison Consolidated Schools will permit appeal of the August 1 date for students who will turn 5 by September 1 with completion of this application, provision of all required documentation, and participation in the Appeal Process.

- Parent/Guardian must submit an Appeal Application to MCS administrative office by June 30th, 2019.
- Parents will be contacted to schedule an appointment for interview/assessment.
- A multidisciplinary assessment team will complete parent interview, student assessment, and observation of behavior/skills during the assessment process.
- Recommendation for early admission to kindergarten will be made by the Early Entrance Committee based on a review of all information provided by the parent, obtained during the assessment, and observable behaviors/skills/data documented during the interview/assessment process.
- Parents will be notified in writing by July 15th as to whether or not early admission will be granted.
- If the student's districted school is at capacity for kindergarten enrollment, the family may be offered enrollment at another district school.
- If the family has requested a transfer from their districted school, this request will also be dependent upon enrollment capacity of the school requested.



Early Kindergarten Entrance Appeal Process  
Application 2019-2020

Child's Name: \_\_\_\_\_

Child's DOB: \_\_\_\_\_  
(Please include a copy of the child's birth certificate)

Parent/Guardian Name: \_\_\_\_\_

Full Address: \_\_\_\_\_

Phone Contact Information: \_\_\_\_\_  
\_\_\_\_\_

Email address: \_\_\_\_\_

School in which enrollment is requested: \_\_\_\_\_

Is this the school your child would attend based on residence? Yes\_\_\_ No\_\_\_

Has the student attended a preschool program? Yes\_\_\_ No\_\_\_

If Yes, did the preschool teacher provide a recommendation regarding early kindergarten admission? Yes\_\_\_ No\_\_\_ (If Yes, please include with the application)

Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date Received: \_\_\_\_\_

(MCS Office Use Only)