

Kids' Corner Preschool – VPK Program Information
2026 - 2027 School Year

Thank you for your interest in choosing Kids' Corner Preschool for your child's educational needs. We have been serving the community for over 30 years, and we look forward to having your child as part of our program.

The Voluntary Pre-Kindergarten Education Program, or VPK, is a free prekindergarten program for 4 and 5-year-old children who reside in Florida. **Participating children must be 4 years of age on or before September 1st.** Please be advised that the state of Florida has strict attendance requirements for VPK programs. We are required by the state to offer 540 hours of pre-k instruction. In return, the state pays the students' tuition. Once enrolled in our VPK program, each student is expected to be in class from 9:00 am until 12: 15pm daily and will be allowed 20% absences per month.

Qualifying students are required to have a "Certificate of Eligibility"/VPK Voucher for admittance into a VPK Program. Visit elcpinellas.net to obtain a State VPK voucher. If you have any difficulty, call The Early Learning Coalition at 727-400-4411.

There is no registration fee for VPK. There is a suggested, but not required, fee of \$100 per child for supplies and activities.

Please complete and return the attached form to register your child for the 2026 - 2027 school year.

If you have questions, please contact:

Roxane Fineo

Kids' Corner License #C860622

2875 State Road 580 Clearwater, FL 33761

schooldirector@northwoodpc.org or 727-723-7679

Kids' Corner Preschool 2026 -2027
VPK Registration Form

Student's Full Name _____

Age _____ D.O.B _____ Age on September 1, 2026 _____

Parent/Guardian Name _____ Telephone _____

Address _____ Cell/Business _____

City _____ State _____ Zip _____

e-mail address _____

Parent/Guardian Name _____ Telephone _____

Address _____ Cell/Business _____

City _____ State _____ Zip _____

e-mail address _____

Parents often request contact information for the purpose of planning parties and play dates. Please indicate your choice by initialing below:

_____ I give permission to share my contact information.

_____ Please do not share my contact information.

Please fully complete and return this page