



SYSTEMATIC SELECTION COMMITTEE SIGNATURE PAGE

- 1. Write in the name of your center.**
- 2. Obtain signatures and date from Intake Selection Committee Members.**
- 3. Attach this form to the CHILDPLUS 2025 ENROLLMENT PRIORITY LISTING. Send to your assigned Program Compliance Coordinator or assigned Program Compliance Specialist.**

This form must be filled out completely with appropriate signatures and dates prior to submission for approval from the Program Compliance Coordinator or assigned Program Compliance Specialist.

Once approved, the FSWA will receive an email with the signed Systematic Selection Committee Signature Page attached from the Program Compliance Coordinator or assigned Program Compliance Specialist.

Center: _____

Intake Selection Committee:

	Signature	Date
Principal:	_____	_____
Staff:	_____	_____
Teacher:	_____	_____
Former Head Start: Parent	_____	_____

This report ranks the order of child applications according to the Head Start Systematic Selection process.

This form, Systematic Selection, and ChildPlus Documentation were reviewed by:

Program Compliance Staff Date

APPROVAL: _____
Program Compliance Coordinator/Specialist Date

**THIS FORM MUST BE COMPLETED AND APPROVED PRIOR TO PRINTING,
SIGNING, AND MAILING ACCEPTANCE LETTERS.**

“Region 7 Education Service Center is committed to student success by providing quality programs and services that meet or exceed our customers’ expectations.”