



**WAKE COUNTY**  
**PUBLIC SCHOOL SYSTEM**

**Project Enlightenment**  
**Office of Early Learning**

501. South Boylan Avenue  
Raleigh, NC 27603

[www.projectenlightenment.wcpss.net](http://www.projectenlightenment.wcpss.net)

tel: (919) 856-7774

fax: (919) 704-2275

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Hello,

Please note the following instructions (digital or hard copy) for completing the *School Request for Kindergarten Consultation* form:

To complete a form digitally:

1. Make a digital copy of the 3 page form to your computer desktop
2. Complete the form electronically
3. Save the completed form to your desktop. You may wish to use the child's initials and the date the form is completed such as RTD 5.14.19
4. Mark the return email as **CONFIDENTIAL**
5. Include the **school name** and **name of the contact ONLY** in the email content
6. Attach the form
7. Send the email to: [tpcconsult@wcpss.net](mailto:tpcconsult@wcpss.net)

To complete a hard copy of the form:

1. Print the attached form
2. Complete the form
3. Place the form in an envelope and seal.
4. Mark the envelope : **CONFIDENTIAL** and also include **RETURN TO: Project Enlightenment, Teacher Parent Consultant**
5. Place the envelope in a courier envelope and mark it confidential or
6. Return the envelope to Project Enlightenment, either in person or via snail mail



## Project Enlightenment

Office of Early Learning • Wake County Public School System  
501 S. Boylan Avenue, Raleigh, NC 27603 • 919-856-7774  
wcpss.net/projectenlightenment

### *SCHOOL REQUEST for KINDERGARTEN CONSULTATION PACKET*

DATE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

**Original forms must be completed and returned to Project Enlightenment via email or through the WCPSS courier.**

Please complete the following request procedures:

1. The Intervention Team Facilitator must complete the **School Request for Kindergarten Consultation** form. Please review the *Kindergarten TPC Consultation Process* located on the back of this page.
2. Please make certain that **all** areas of the form, **School Request for Kindergarten Consultation** are complete. The completed form must be signed by the Intervention Team Facilitator and the Principal.
3. The Intervention Team Facilitator submits the **School Request for Kindergarten Consultation** form to Project Enlightenment via email to [tpcconsult@wcpss.net](mailto:tpcconsult@wcpss.net) or through the WCPSS courier.
4. After Project Enlightenment receives the completed form, a Teacher Parent Consultant will contact the Intervention Team Facilitator.

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The above procedures are to be followed on all requests that your school makes this year. Please feel free to call 919-856-7774 if you have any questions.

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# School Request for Kindergarten Consultation

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wcpss.net/projectenlightenment

Date

Consultant

Please note that this form is to be completed by the Intervention Team Facilitator and signed by the School Principal before submittal.

## Student Information

Child's Name \_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
Name used in classroom Birth date Age of child

Child's Street Address \_\_\_\_\_ City & Zip \_\_\_\_\_

Primary Phone ( \_\_\_\_ ) \_\_\_\_\_ Secondary Phone ( \_\_\_\_ ) \_\_\_\_\_

Child lives with: ☐ both Parents ☐ Mother ☐ Father ☐ Guardian

Child's Gender: ☐ Male ☐ Female

Child's Ethnicity: Is the student Hispanic or Latino? ☐ Yes ☐ No

Child's Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or Other Pacific Islander ☐ White

Language primarily spoken in the home \_\_\_\_\_

Parent's Name \_\_\_\_\_ Parent's Name \_\_\_\_\_

Employer \_\_\_\_\_ Employer \_\_\_\_\_

Primary Phone ( \_\_\_\_ ) \_\_\_\_\_ Primary Phone ( \_\_\_\_ ) \_\_\_\_\_

Email Address \_\_\_\_\_ Email Address \_\_\_\_\_

Siblings (names, ages) \_\_\_\_\_

## School Information

Intervention Team Facilitator \_\_\_\_\_ Email Address \_\_\_\_\_  
First Last

Intervention Team Facilitator Phone Number \_\_\_\_\_

Principal \_\_\_\_\_  
First Last

Name of School \_\_\_\_\_ School Phone ( \_\_\_\_ ) \_\_\_\_\_

Teacher \_\_\_\_\_ Email Address \_\_\_\_\_  
First Last

School Start Time \_\_\_\_\_ Child's Track (circle one): N/A 1 2 3 4

**Brief Description of Concern**

**Intervention Team Facilitator Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Principal Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Please note:

This form must be submitted to: Teacher/Parent Consultant Secretary, Project Enlightenment via email to [tpcconsult@wcpss.net](mailto:tpcconsult@wcpss.net) or through WCPSS courier. If you have any questions please call 919-856-7774.

# Kindergarten TPC Consultation Process

**A** Teacher Parent Consultant (TPC) from Project Enlightenment seeks to empower children and families by building on strengths and providing parenting support, resources and information.

***The consultative process will include the following:***

Project Enlightenment receives request for services from  
Intervention Team Facilitator/Principal



TPC is assigned to case



TPC contacts Intervention Team Facilitator/Principal



TPC collaborates with Intervention Team Facilitator/Principal  
to support Parents/Families with  
understanding and supporting tiered plans



TPC shares Recommendations, Resources and Progress



TPC provides Data and Reporting

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