

Student Name

Dual Language Immersion Application

2019 – 2020

Eligible Students: Rising 1st grade and higher for 2019-2020

Application Window opens: March 11, 2019 See APS DLI website for additional details: https://tinyurl.com/apsDLIprogram

Last:	First:	Middle:
Age:	Date of Birth (MM/DD/YY):	Gender: Female Male
Address:		
		Zip Code:
E-Mail Addres	ss:	
		Work #:
Was your chil	d previously in a DLI program?Yes	No If yes, name of school:
Location:	Phone	Number:
What was the	target language of instruction used in the D	DLI program?
Family Inform	ation	
Siblings: Does	s your child have siblings currently in the AP	S dual language immersion program? YES NO
Name:	Grade:	DOB:
Name:	Grade:	DOB:

The Dual Language Immersion (DLI) Program model in Atlanta Public Schools is a 50/50 model. This application is part of the admission process and does not guarantee selection into the program. Should interest in the program exceed the number of available slots, parents will be notified and an internal lottery process conducted. After the first week of school, admission to fill any remaining seats will be allocated based on the results of the lottery. Priority admission is given to students who are native Spanish speakers, students currently in a Spanish DLI program, and to siblings of students already in the DLI program. Twins will be treated as one applicant in a lottery process. The APS DLI program only serves students who reside within the school's attendance zone unless the school is designated a Choice School.

This application is only considered complete when submitted with a completed APS Student Enrollment Form.

I understand enrollment of my child is conditional upon space availability and my commitment to the following:

1. Children enrolled in the APS Dual Language Immersion Program at this school will remain together in Kindergarten through 5th grade. Since success in an immersion program requires consistent instruction over time, I intend to support my child's continued enrollment in the Dual Language Immersion Program at this school.

2. I understand that content instruction in math, language arts, social studies, and/or science will be in Spanish.

3. I will support the program by encouraging my child's biliteracy and bilingualism.

4. I will consult with teachers and administration for additional strategies to support my child's overall success in the Dual Language Immersion Program.

Parent/Guardian Signature:	Date:
Parent/Guardian Signature:	Date:

Completed applications must be submitted to your child's school with the completed New Student Enrollment Form.

School Use Only: Enter the responses to the following questions based on information provided by parent on the New Student Enrollment Form:

what language does your child <u>best</u> understand and speak?*	
What language does your child most frequently speak at home?*	

What do adults in your home most frequently use when speaking with your child?*_

*Note: Any indication of a language other than English obligates the district to screen the student for ESOL program services.