



Spanish Dual Language Application  
2019-2020  
Please use for incoming Kindergarten Students

**Due Date: April 30, 2019** – Application must be received by 5:00 PM on April 30, 2019. Applications may be faxed to (253) 373-7127, hand delivered to the Student Services Office, or mailed to 12033 SE 256<sup>th</sup> Street, Suite A-300, Kent, WA 98030-6503

Please print all information:

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

Student Last Name: \_\_\_\_\_ Student First Name: \_\_\_\_\_

Student's First Language: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Student's Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Language other than English spoken in the home (if any): \_\_\_\_\_

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

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

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

My child's boundary school is (check one):

Kent Elementary

Neely O'Brien Elementary

Scenic Hill Elementary

Other KSD School: \_\_\_\_\_

Other Non KSD School: \_\_\_\_\_

If requesting a Dual Language program that is not at your boundary school, you must also apply for a transfer between April 1-30.

If a sibling is currently attending a KSD Spanish Dual Language School, please list:

Sibling Name: \_\_\_\_\_ School: \_\_\_\_\_

If you have any questions please contact the Multilingual Education Office at **253-373-7269**