School Year for Application: _____

Boise School District
Dual Language Program
Application Form

Student Name _____
First Middle Last

Address _____

Phone numbers _____
Home Work Cell Cell

Home School _____ Birth date _____ _____ _____
Month Day Year

Male _____ Female _____ Student's *first* language: Spanish _____ English _____

What grade level will your child be entering this fall? _____

What language does your child speak at home? _____

Does your child read and write in Spanish? ☐Yes ☐No

Does your child have a sibling in the program? ☐Yes ☐No

Do you live within the Boise School District boundaries? ☐Yes ☐No

Are you employed by the District? ☐Yes ☐No

Do you live outside Boise boundaries? ☐Yes ☐No

If yes, which district do you reside in? _____

Do you prefer AM or PM Kindergarten*? ☐AM ☐PM ☐Not applicable
*Not guaranteed

Which program site do you prefer? ☐Whitney ☐Whittier

If your preferred site is full, would you consider the other site? ☐Yes ☐No

Parent/Guardian Signature _____

To be considered for enrollment, this application (along with birth certificate and proof of immunizations) is due to Whitney (1609 S. Owyhee, Boise, ID 83705, 208-854-6580) or Whittier (301 N. 29th, Boise, ID 83702, 208-854-6630) by **May 1st**.
If you apply after May 1st your application will be added to a list and you will be notified as openings become available.