



FREMONT UNIFIED SCHOOL DISTRICT
Office of Student Support Services
4210 Technology Drive – Room 160
Fremont, CA 94538
(510) 659-2514

FOR OFFICE USE ONLY:	
School of Residence:	_____
Student Name (Last)	_____
Student Name (First)	_____
Gr in 18/19 _____	ID #: _____
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	_____
	Director, Student Support Services
Date Information Entered into Illuminate:	_____ by _____

2018/2019 K-6th DUAL LANGUAGE IMMERSION APPLICATION

Application Period: January 18 – March 28, 2018

The Fremont Unified School District is proud to offer the following special program to students in Kindergarten-6th grades:

The District's Dual Immersion program is an alternative educational model designed to provide students with fluency and literacy in either Spanish or Mandarin. This program is open to non English-speaking and English-speaking students. The Mandarin Immersion Program is only offered at Azevada Elementary School. The Spanish Immersion Program is offered at three (3) sites: Blacow, Grimmer, and Vallejo Mill Elementary Schools. **Please be advised that student placement will be determined by space and program needs for the Spanish Immersion Program.**

Student Name (Last, First) _____ Date of Birth _____

Special Ed.: No Yes (Resource, Speech, Special Day Class (SDC) /Other _____) 504 Plan: No Yes

Grade in 18/19 ____ Student's Primary Language: English Mandarin Spanish Other _____

Please ensure you rank your choices in the order of your priority:

	1 st choice	2 nd choice
Mandarin Immersion		
Spanish Immersion		

Is parent/guardian an employee of the Fremont Unified School District? No Yes **Site:** _____

Sibling Information (current year, if applicable)

Sibling Name (Last, First) _____ Date of Birth _____ Gr ____

Is this student currently in a Dual Language Immersion Program? No Yes If yes, at what site? _____

For Kindergarten students ONLY:

I understand the following:

- | | |
|--|------------------------------|
| ❖ by applying for any of the programs listed above, I am electing to give up my student's rights to the Kindergarten Lottery (if applicable @ student's home school). | <i>Initial Here</i>
_____ |
| ❖ if my student is not selected for any of the programs listed above, my student will automatically be entered in the Kindergarten Lottery (if applicable @ student's home school) | _____ |
| ❖ If I decline the program placement, my student will be placed at the bottom of the waitlist at the home school (if applicable) | _____ |

I understand the following:

- if I accept placement of my student in the requested program, I understand my student may remain until completion of the program, as long as my student remains a resident of Fremont. _____
- if I accept placement of my student at the requested program, my student's resident status at the home school will be terminated and my student will lose registration priority at the home school. _____
- if I later decide I want my student to return to the home school, my student will be admitted as a new student based on space availability. If space is not available, I understand my student will be assigned to another school. _____
- I am responsible for providing any necessary transportation for my student to attend the requested program. _____

Name of Parent/Guardian _____ Contact Number _____

Home Address _____ Apt. # _____ City _____, CA Zip Code _____

Signature of Parent/Guardian _____ E-Mail Address _____ Date _____