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Date Received

Interest Form for Dual Language Immersion (DLI) Program

Transitional Kindergarten age are NOT eligible for Dual Language Immersion Program

Student's Information

Gender: _____ Date of Birth: ____/____/____

Currently Attending

DLI School's Name/City _____

Attach Proof of Attendance – Must be a Spanish/English DLI Program to Have Priority

Family Information

Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Email: _____

Parent #1/Guardian #1: _____

