

French Dual Language Immersion Program Jordan School District

Application Form"Completed applications will be accepted for a random selection process."

2021-22 Upcoming School Year

Demographic Information			
Student's Name		Student's Birthday	Entering Grade Level
Parent or Guardian's Name		Home Phone No.	Mobile Phone No.
Address			
Do you live within the boundary o	of:		
Fox Hollow Elementary School		(Yes)	(No)
If you answered 'no,' please indic boundaries your child currently l		e of the school and dist	rict within whose
School		District	
Do you have any sibling/s in a Fr participating schools? If 'yes' , fill in the following:	ench Dual L	anguage Immersion pr	ogram at any of our
		School	
	Grade/s	Name o	f sibling/s

About Your Child

What language did your child first learn to speak?			
What is the primary language spoken in your home?			
Does either parent or guardian speak French?	Father	Mother	Neither
Do you know anyone who speaks French?	(Yes)	(No)	
Would they be available to volunteer in the school?	(Yes)	(No)	
Does your child have any language delays? If 'Yes,' please explain:	(Yes)	(No)	
Please share any other information that would provio	de assistance i	n the enrollme	ent

NOTE: "The elementary dual language immersion program is considered to be a comprehensive educational experience. Beginning in the first grade, paired English and target language teachers collaborate to support student mastery of both the core content standards and target language skills in a full day program. It is our expectation that students who participate in the language immersion experience participate fully in the school academic day and its prescribed instructional design."

Please complete and return your application along with the Parent Commitment Form to the school for whose program you are applying.

Fox Hollow Elementary School (Trad.)

6020 West 8200 South West Jordan, Utah 84081 Tel. No. (801) 282-1818

*** See next page for Parent Commitment Form ***

PARENT COMMITMENT FORM

JSD French Dual Language Immersion Program



Paren	t Name	Date		
	s Name			
progra of my	equesting that my child be enrolled in that many child be enrolled in the			
1.	Children enrolled in the French immer grade through sixth grade.	sion program will remain together in first		
2.	I understand that parents need to read English.	to their child at home 20-30 minutes daily in		
3.		n requires consistent instruction over time, I ch immersion program in grades one through		
4.	I understand attendance is of key impo at school on time and attend school exc	rtance and commit to having my child arrive cept for illness and family emergencies.		
5.	I will consult with teachers and adminimy child to increase success in the Free	stration for additional strategies to support nch immersion program.		
6.	. I understand that the dual immersion model will be implemented in each class of my child's 50/50 day. Content and instruction will be based on the state model.			
7.	7. Once enrolled in the Dual Language Immersion program, any academic/behavior concerns will be addressed with the principal. Appropriate interventions will be implemented. If documented interventions are unsuccessful, a formal conference with the principal, parents, student, and teacher, will take place.			
Paren	t Signature:	Parent Signature:		
Date:	/ /	Date: / /		