

Application for Pre-Kindergarten

Nordheim Independent School District
 500 North Broadway
 Nordheim, TX 78141
 2019-2020
 Telephone: 361 938-5211 Fax: 361 938-5266

S 29.153 of the Texas Education Code lists qualifications of children for Pre-Kindergarten programs. The child whose name appears below is applying to be considered for entry into the Nordheim Independent School District's Pre-Kindergarten program. Please complete the application by printing the required information.

Child's Name	Child's SSN	Child's Birth Date	Total Number in Household
Parent's Name	Address		Phone Number

Criteria for admittance:

- Child will be 4 years of age on or before September 1, 2019.
- Child is a resident of the Nordheim Independent School District.
- Child is an approved transfer student.
- Child meets immunization requirements.

Please complete the following section about household income. Please complete the attached home language survey. This information will be used to determine state funding eligibility

Please provide copies of income documentation for the following information:

Name of Household Member	Job Income	How Paid? (Circle One)	Other Income	How Paid? (Circle One)
1. _____	\$ _____	Yr. Mo. Wk.	\$ _____	Yr. Mo. Wk.
2. _____	\$ _____	Yr. Mo. Wk.	\$ _____	Yr. Mo. Wk.
3. _____	\$ _____	Yr. Mo. Wk.	\$ _____	Yr. Mo. Wk.
4. _____	\$ _____	Yr. Mo. Wk.	\$ _____	Yr. Mo. Wk.

Food Stamp, SNAP or TANF Case Number (copy of documentation) _____

I understand that school officials may verify the information on this application. I certify that all of the above information is true and correct and that all income is reported.

Parent/Guardian Signature	Date
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Copies of the following information required for enrollment:

___ SSN Card ___ Birth Certificate ___ Proof of Address ___ Immunization Records

TO BE COMPLETED BY SCHOOL PERSONNEL

(Attach Copies of Required Documentation)

_____ **Approved for State Funding**

_____ **Not Eligible for State Funding**

_____ **Limited English Proficient**

*Home Language Survey must indicate child hears /speaks a language other than English a home.

*Child has been tested with oral English assessment. (Attach proof of assessment and scores. A score of 1, 2, or 3 indicates eligibility as LEP.)

*Parent must sign Notification of Enrollment in Bilingual/ESL Program.

_____ **Homeless**

*Child lacks a fixed, regular, and adequate residence.

*Primary nighttime residence is a supervised public or private shelter designed to provide temporary living accommodations, or an institution that provides temporary residence for individuals intended to be institutionalized.

*Primary nighttime residence is a public or private place not designed for, or ordinarily used as, a residence is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

_____ **Income Eligibility**

_____ **Dependent of Active Duty Member of the Military; Mobilized Reservist/Guardsman; Service Member who was injured, died, or killed while serving on active duty.**

*Department of Defense Identification

*Statement of Service

*Purple Heart Orders or Citation

*Death Certificate using appropriate Department of Defense Form

Copies of the following information required for enrollment:

Signature of Superintendent

Kevin Wilson

NORDHEIM INDEPENDENT SCHOOL DISTRICT/CHARTER SCHOOL

HOME LANGUAGE SURVEY-19 TAC Chapter 89, Subchapter BB, §89.1215

(Home Language Survey applicable ONLY if administered for students enrolling in pre-kindergarten through grade 12)

TO BE COMPLETED BY PARENT OR GUARDIAN FOR STUDENTS ENROLLING IN PREKINDERGARTEN THROUGH GRADE 8 (OR BY STUDENT IN GRADES 9-12):
The state of Texas requires that the following information be completed for each student who enrolls in a Texas public school for the first time. It is the responsibility of the parent or guardian, not the school, to provide the language information requested by the questions below.

Dear Parent or Guardian:

To determine if your child would benefit from Bilingual and/or English as a Second Language program services, please answer the two questions below.

If either of your responses indicates the use of a language other than English, then the school district must conduct an assessment to determine how well your child communicates in English. This assessment information will be used to determine if Bilingual and/or English as a Second Language program services are appropriate and to inform instructional and program placement recommendations. If you have questions about the purpose and use of the Home Language Survey, or you would like assistance in completing the form, please contact your school/district personnel.

For more information on the process that must be followed, please visit the following website:

https://projects.esc20.net/upload/page/0084/docs/EL%20Identification_ReclassificationFlowchart%202018.pdf

This survey shall be kept in each student's permanent record folder.

NAME OF STUDENT: _____

STUDENT ID#: _____

ADDRESS: _____

TELEPHONE #: _____

CAMPUS: _____

NOTE: PLEASE INDICATE ONLY ONE LANGUAGE PER RESPONSE.

1. What language is spoken in the child's home most of the time? _____
2. What language does the child speak most of the time? _____

Signature of Parent/Guardian _____

Date _____

Signature of Student if Grades 9-12 _____

Date _____

NOTE: If you believe you made an error when completing this Home Language Survey, you may request a correction, in writing, only if: 1) your child has not yet been assessed for English proficiency; and 2) your written correction request is made within two calendar weeks of your child's enrollment date.

NORDHEIM INDEPENDENT SCHOOL DISTRICT/CHARTER SCHOOL

Cuestionario sobre el idioma que se habla en el hogar

19 TAC Chapter 89, Subchapter BB §89.12'15

DEBE DE COMPLETARSE POR EL PADRE O TUTOR PARA ESTUDIANTES QUE CURSEN DESDE PREKINDER HASTA EL OCTAVO GRADO: (O POR EL ESTUDIANTE SI CURSA GRADOS DEL 9-12): El estado de Texas requiere que la siguiente información sea completada para cada estudiante que se matricula por primera vez en una escuela pública de Texas. Es la responsabilidad del padre o tutor, no de la escuela, proporcionar la información del idioma requerida por las siguientes preguntas.

Querido padre o tutor:

Para determinar si su hijo(a) se beneficiara de los servicios de los programas bilingües y/o de inglés como segundo idioma, por favor responda las dos preguntas siguientes.

Si cualquiera de sus respuestas indica el uso de un idioma que no sea inglés, entonces el distrito escolar debe realizar una evaluación para determinar que tanto se comunica su hijo(a) en inglés. Esta información resultante de la evaluación se usará para determinar si los servicios de programas bilingües y/o de inglés como segundo idioma son apropiados e informará las recomendaciones en cuanto a la instrucción y la asignación del programa. Una vez completada la evaluación de su hijo(a), no se permitirán cambios a las respuestas en el cuestionario. Si tiene preguntas sobre el propósito y el uso del cuestionario sobre el idioma que se habla en el hogar, o si necesita ayuda para completar el cuestionario, por favor comuníquese con el personal del distrito escolar.

Para más información sobre el proceso que debe seguirse, por favor visite el siguiente sitio web:

https://projects.esc20.net/upload/page/0084/docs/EL%20Identification_ReclassificationFlowchart%202018.pdf

Este cuestionario se deberá archivar en el expediente permanente del estudiante.

NOMBRE DEL ESTUDIANTE: _____

ID#: _____

DIRECCIÓN: _____

TELÉFONO: _____

ESCUELA: _____

Nota: Indique sólo un idioma por respuesta.

1. ¿Qué idioma se habla en la casa de su hijo(a) la mayoría del tiempo? _____

2. ¿Qué idioma habla su hijo(a) la mayoría del tiempo? _____

Firma del padre o tutor

Fecha

Firma del estudiante si esta en los grados 9-12

Fecha

NOTA: Si cree que cometió un error al completar este cuestionario sobre el idioma que se habla en el hogar, puede solicitar una corrección, por escrito, solo si: 1) su hijo(a) aún no ha sido evaluado para el dominio del inglés; y 2) su solicitud de corrección por escrito se realiza dentro de las dos semanas calendario posteriores a la fecha de inscripción de su hijo(a).