

KANKAKEE SCHOOL DISTRICT #111 MAGNET ENROLLMENT FORM

Please Print – Use a separate form for each child wishing to transfer and for each child entering. All questions should be completed or request may not be honored.

For office use only:
 Date Received: _____
 Time Received: _____

Is your child currently in a Magnet Class? If yes do not proceed unless you are requesting your child be transferred to a different Magnet Class.

DO NOT PROCEED IF YOU WANT YOUR CHILD TO STAY IN THE MAGNET PROGRAM THEY ARE CURRENTLY ATTENDING!

IMPORTANT: Applications must be received in the **Instructional Programs Office, Lincoln Cultural Center, 240 Warren Avenue, Room 216, Kankakee, IL 60901**. If you have any questions or need additional information please call (815) 802-7720 or 815-802-7728. To be included in the initial lottery placement, application must be received in the Instructional Programs Office between January 25 – February 3.

BACKGROUND INFORMATION

Is this child currently in a Magnet Programs? Yes No If yes, where? _____

Does this child have any siblings CURRENTLY attending a magnet program? If so, please list the siblings' names, grade and Magnet Program attending.

	Student Name	Grade	Magnet Program
_____	_____	_____	_____
_____	_____	_____	_____

Please check the appropriate box

	Yes	No	If yes, where?
Previous Montessori experience?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is this child currently in the Bilingual Program?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Does this child have previous Dual Language Experience?	<input type="checkbox"/>	<input type="checkbox"/>	_____

What is the first language the student learned to speak? _____

What language does the student speak most at home? _____

Please complete all of the fields below. Applications with missing information will be returned.

Student Information	Program Selection	Parent/Guardian Information
<p>Students Last Name _____</p> <p>Students First Name, Middle Initial _____</p> <p>Date of Birth: _____</p> <p>Age: _____ Gender: <input type="checkbox"/> M <input type="checkbox"/> F</p> <p>Ethnicity: <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Multi-Cultural <input type="checkbox"/> Other: _____</p> <p>Current Grade: _____ School: _____</p> <p>What grade will this student be in for the 2017-2018 school year? _____</p>	<p>Please indicate 1st and 2nd choice</p> <p>_____ Science</p> <p>_____ Engineering</p> <p>_____ Fine Arts</p> <p>_____ Math</p> <p>_____ Dual Language <i>(K-5 only)</i></p> <p>_____ Montessori</p>	<p>Parent/Guardian Name _____</p> <p>Address _____</p> <p>P.O. Box _____</p> <p>City, State, Zip _____</p> <p>Home Phone: _____</p> <p>Cell Phone _____</p> <p>Work Phone: _____</p>

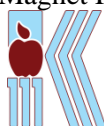
Please read and sign the Parent Contract on the reverse side. Unsigned applications/contracts will be returned.

CONTRACT FOR PARENTS

Kankakee School District 111 Magnet Programs are enrichment programs that will provide an educational setting dedicated to the development of academic skills and an introduction to the specific area of the magnet with the goal of creating responsible citizens. Teaching will take place in a structured classroom setting where expectations are firmly established.

Kankakee School District 111 Magnet Programs have high expectations of their students and parents. In order to meet these expectations the following guidelines have been established. Please read the following guidelines and sign below that you are willing to help us meet the requirements of the schools.

1. I understand my child will attend school every day, will arrive promptly, and will remain throughout the scheduled hours.
2. I understand that my child is to cooperate and conduct himself/herself with teachers, staff, and classmates in a manner that shows respect for all persons.
3. I understand that my child is to complete all required work including homework. I understand that the work must be on time to receive full credit according to each classroom's grading policy.
4. I understand that my child needs to successfully fulfill curricular expectations specific to each magnet.
5. I will insure that my child has a time and place to study daily at home.
6. I understand that my child is to respect and care for all personal and school supplies and property.
7. I understand that as a parent, I must be supportive of my child and the school program by providing volunteer services (per family per year.) *A list of volunteer options to follow once magnet placement has taken place.*
8. I support of my child and the school program, my child and I will participate in school meetings and other activities. (i.e. Family Nights...science, math, computer, and Fine Arts Showcases/performances, etc.)
9. I understand that as a parent, I must attend two (2) scheduled parent conferences per year.
10. I further understand that if my child is removed from the program because of the above statements, my child may not re-enter that magnet program.
11. Kankakee School District 111 is committed to offering the Dual Language Program in Kindergarten through sixth grade. By doing so, District 111 accomplishes the goal of continuing to develop the students' academic and linguistic skills in both languages. It is highly recommended that students remain in the Dual Language Program until they have finished sixth grade where they will become bilingual and bi-literate. I am stating my support and commitment for my son/daughter to have the opportunity to successfully participate in the Dual Language Program until sixth grade if selected.
12. I understand that completion and receipt of this application ensures that the student will be **considered** for selection to the KSD Magnet Programs but does **not** guarantee placement.



Student's Name (Please print)

Signature of Parent or Guardian

Date