

2018-2019 CHOICES APPLICATION-MAGNET, PWT AND DLP

THIS APPLICATION MAY ONLY BE SUBMITTED FOR THE 2018-2019 SCHOOL YEAR. OTHER APPLICATIONS WILL NOT BE PROCESSED.

You may apply online at eChoices.lausd.net or by completing this application

STUDENT INFORMATION - PLEASE COMPLETE THE INFORMATION BELOW.

1. STUDENT'S LAST NAME

STUDENT'S FIRST NAME MI

2. STUDENT'S ADDRESS - NUMBER AND STREET (P.O. BOXES ARE NOT ACCEPTED)

NUMBER STREET NAME

APARTMENT NO.

4. GRADE THIS SCHOOL YEAR 2017-2018 5. GRADE NEXT SCHOOL YEAR 2018-2019

3. CITY ZIP CODE

6. STUDENT'S GENDER Male Female

7. SCHOOL NOW ATTENDING

Has your child ever been enrolled in an LAUSD school? Yes No

8. STUDENT'S BIRTHDATE 9. HOME TELEPHONE NUMBER

MONTH DAY YEAR AREA CODE

10. WORK OR EMERGENCY TELEPHONE NUMBER EXTENSION

AREA CODE

11. PARENT/LEGAL GUARDIAN'S LAST NAME PARENT/LEGAL GUARDIAN'S FIRST NAME MI

12. PARENT/LEGAL GUARDIAN'S EMAIL ADDRESS

We may use the email address you provide to inform you of the status of your child's application.

STUDENT'S ETHNICITY/RACE - FILL IN ONLY ONE

- American Indian/Alaskan Native African American/Black White
 Asian Hispanic/Latino Native Hawaiian/Pacific Islander

You may fill in "Multi-racial/Multi-ethnic"; however, by Court Order, you **MUST** also bubble ONE federally identified ethnicity/race category to the left for the purpose of Magnet/PWT selection. **A Magnet or PWT Application will not be processed unless an ethnicity/race is also indicated.**

Multi-racial/Multi-ethnic

PROGRAM OPTIONS - SELECT FROM THE PROGRAM(S) BELOW: A. MAGNET, B. PERMITS WITH TRANSPORTATION (PWT) AND/OR C. DUAL LANGUAGE/BILINGUAL

A. MAGNET PROGRAM - TRANSPORTATION MAY BE PROVIDED (SEE PAGE 7)

This option allows you to select a magnet program by making up to three choices. Print the school code and the full name of the magnet program for which the student is applying. School codes are located in front of the school name on **Pages 14-32**. (If applying to a gifted and/or highly gifted magnet, please see requirements on **pages 28-29**.)

1ST CHOICE: SCHOOL CODE FIRST MAGNET SCHOOL YOU ARE REQUESTING (PLEASE PRINT SCHOOL NAME EXACTLY AS IT APPEARS ON PAGES 14-32)

(OPTIONAL) 2ND CHOICE: SCHOOL CODE SECOND MAGNET SCHOOL YOU ARE REQUESTING (PLEASE PRINT SCHOOL NAME EXACTLY AS IT APPEARS ON PAGES 14-32)

(OPTIONAL) 3RD CHOICE: SCHOOL CODE THIRD MAGNET SCHOOL YOU ARE REQUESTING (PLEASE PRINT SCHOOL NAME EXACTLY AS IT APPEARS ON PAGES 14-32)

B. PERMITS WITH TRANSPORTATION (PWT) PROGRAM - TRANSPORTATION WILL BE PROVIDED (SEE PAGE 7)

- PWT This option allows you to select the PWT Program. Please fill in this bubble if you live in a PWT Sending Area. Call (213) 241-6572 or visit the eChoices.lausd.net website to check if your address qualifies. The District will assign a school for your child to attend.

C. DUAL LANGUAGE PROGRAM/BILINGUAL PROGRAMS - TRANSPORTATION IS NOT PROVIDED (SEE PAGE 36)

This option allows you to select a Dual Language, Maintenance Bilingual, Transitional Bilingual, or Foreign Language Immersion Program by making up to three choices. Print the school code and full name of the selected school(s). Your answers to the questions below will help determine the priority order for potential placement in the Dual Language/Bilingual Program. Call (213) 241-2550 for all Dual Language/Bilingual Program inquiries.

1ST DUAL LANGUAGE: PROGRAM CODE FIRST DUAL LANGUAGE PROGRAM YOU ARE REQUESTING (PLEASE PRINT PROGRAM NAME EXACTLY AS IT APPEARS ON PAGES 41-46)

(OPTIONAL) 2ND DUAL LANGUAGE: PROGRAM CODE SECOND DUAL LANGUAGE PROGRAM YOU ARE REQUESTING (PLEASE PRINT PROGRAM NAME EXACTLY AS IT APPEARS ON PAGES 41-46)

(OPTIONAL) 3RD DUAL LANGUAGE: PROGRAM CODE THIRD DUAL LANGUAGE PROGRAM YOU ARE REQUESTING (PLEASE PRINT PROGRAM NAME EXACTLY AS IT APPEARS ON PAGES 41-46)

LANGUAGE(S) SPOKEN IN THE HOME:

- ARABIC ARMENIAN ENGLISH FRENCH KOREAN MANDARIN SPANISH OTHER

WHAT LANGUAGE(S) DOES YOUR CHILD SPEAK?

- ARABIC ARMENIAN ENGLISH FRENCH KOREAN MANDARIN SPANISH OTHER

SIBLING INFORMATION

If the above applicant has siblings currently enrolled in a program which he/she is applying (first program choice only) and the sibling will be continuing next year, please fill out the sibling's information below.

SIBLING'S LAST NAME SIBLING'S FIRST NAME MI SIBLING'S BIRTHDATE

MONTH DAY YEAR

Multiple-birth applicants must submit separate applications, reside at the same address, and apply to the same program and grade (first program choice only).

TWIN'S/TRIPLET'S FIRST NAME MI TRIPLET'S FIRST NAME MI

INFORMATION SHARING

If your child is placed on a waiting list, do you want his/her name shared with other schools that may have space available? See information on **page 50**. YES NO

SIGNATURE

79219

For the student to be eligible for selection or assignment, all information must be complete and accurate. The application must be signed in black or blue ink. Falsification of information will result in an application not being processed and/or an applicant's removal from the program. It is the responsibility of the parent/legal guardian to read all application guidelines and instructions and to complete the application correctly or it will be rejected.

SIGNATURE OF PARENT OR LEGAL GUARDIAN (USE BLACK OR BLUE INK)

DATE

MONTH DAY YEAR

FOLD

FOLD

FOLD

FOLD