



# 2020-2021 School Year Young 5's Kindergarten Placement Request Form

**(this form is only valid when accompanied by a completed registration process which includes providing original documents to the home school)**

## Completed by Parent/Guardian

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_

Parent's/Guardian's Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

According to my address, my home school is \_\_\_\_\_

Placement for Young 5's kindergarten classes will be based on enrollment and available space. Currently, the school district has five locations. You are welcome to request a location, which will be determined by a lottery system. **Only those registrations that are completed (including original documents provided in person to the home school) between March 2, 2020 - March 6, 2020 will be included in the lottery drawing.** All registrations after March 6, 2020 will be placed in the order received and will be based on available seats in the classrooms at each identified location. Families will be informed via email of their placement at the beginning of May.

## **2020-2021 Planned Session Offerings\***

**Please indicate your preference by numbering 1, 2, 3, 4 etc. with #1 as the first choice and #5 the last choice**

Young 5's Kindergarten Classes\* (all classes are full day sessions)

***\*locations subject to change***

***Proposed bell times:*** Monday, Tuesday, Wednesday and Friday 8:28 am - 3:35 pm and Thurs. 8:48 am – 3:55pm

\_\_\_\_\_ Young 5's Kindergarten Classroom at [Bentley](#) Elementary School\*

\_\_\_\_\_ Young 5's Kindergarten Classroom at [Farrand](#) Elementary School\*

\_\_\_\_\_ Young 5's Kindergarten Classroom at [Hoben](#) Elementary School\*

\_\_\_\_\_ Young 5's Kindergarten Classroom at [Hulsing](#) Elementary School\*

\_\_\_\_\_ Young 5's Kindergarten Classroom at [Isbister](#) Elementary School\*

**FAMILIES ARE RESPONSIBLE FOR TRANSPORTING THEIR CHILD TO AND FROM SCHOOL**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Building Secretaries:** *Please Complete and attach to the Registration Packet and forward to Michelle Bauer- T/L Department E.J. McClendon Center. Please note the date sent in your records.*

Registration Completed \_\_\_\_\_ Yes \_\_\_\_\_ No

DATE Received \_\_\_\_\_