

Gary L. Herod Elementary

5627 Jason Street Houston, TX 77096 ①713-778-3315, Fax 713-556-7758 www.houstonisd.org/HerodElem

Two-Way Dual Language Application

I would like my child to be considered for the Two-Way Dual Language Program for the 2017-2018 school year. I understand that I must turn in this application to Herod ES. I also understand that I will receive an appointment to have my child assessed and interviewed for the program. After the screening, Herod's Two-Way Dual Language Admissions Committee will meet to consider my child's application.

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The goals for the D	ual	Language students are:						
 Acquisition and enhancement of basic communicative skills in English and Spanish. (Bilingualism) 								
Demonstration of mastery in all academic areas in English and Spanish. (Biliteracy)								
Development of cross-cultural sensitivity.								
Child's Name							Grade (17-18)	
Birthdate					Prev	ious School		
•						<u>.</u>		
Address						City/State/Zip		
•						·		
Home Phone								
Home Language						Generation		
Mother's Name		Wk Phone		Phone		Cell Phone		
Father's Name				Wk	Phone		Cell Phone	
Zoned to Herod			□ye	es	□no			
Sibling attending Herod		□ye	es	□no	Sibling's Name			
Applying for Vanguard at Herod [□ye	es	□no				
I also understand that due to the long term nature of the program goals, several years of participation are required								
for the benefits of the program to be fully realized. With my signature below, I agree to the following requirements								
for entrance and continuation in the program should my child be accepted:								
> K-5 th commitment to the Dual Language Program.								
Minimum satisfactory conduct.								
We ask that parents volunteer a minimum of 10 hours per school year.								
Signature Date								

Required Documents for Application

- Proof of Residence
- Birth Certificate
- Home Language Survey

Students going to grades 1-5 must show documentation of previous Bilingual/Dual Language Program enrollment



HOUSTON INDEPENDENT SCHOOL DISTRICT **HOME LANGUAGE SURVEY** (PK - 12) (English)

Student Name:	School:					
Student Address:	Home Phone:					
Date of Birth: Grade:	HISD ID#: PEIMS#:					
Date of Birth: Grade:						
The Texas Education Code requires schools to determ This information is essential in order for schools to provio the following questions.						
PART A:						
schools	al entry into U.S. (I) Number of complete academic years in a U.S. school					
City Country Month Day	yYear					
(I) When your child lived outside the U.S., did he or she						
Yes, my child attended school regularly in all preNo, my child missed significant portions of one or	=					
	and year (example: Grade 2, Jan. 2002 through May					
	sted less than one month. Do not include regularly					
scheduled school holidays or vacations.						
(M) Has your family worked in either the AGRICULTURE	or FISHING INDUSTRY in the last 3 years?					
☐ Yes ☐ No	,					
PART B:						
 What language is spoken in your home most English Spanish Vietnamese 	of the time? Other (Specify)					
What language does the student (do you) speak most of the time? English Spanish Vietnamese Other (Specify)						
-						
0 1 8% 0	i o . I . o . 10					
Grades PK – 8	Grades 9 – 12					
(Parent or Guardian)	(Parent or Guardian or Student)					
(Date)	(Date)					
(Date)	(Baile)					
NOTE TO COULD PERCOUNT						
NOTE TO SCHOOL PERSONNEL: 1. Signed copy of the Home Language Survey (HLS) must be	filed in the Yes, NEEDS OLPT ENTRY TESTING (If entering grades PK-12)					
student's permanent folder. 2. In Part A, items marked with an (I) are required for ident	,					
immigrant students. (Refer to Bilingual/ESL Program Gui	delines for Yes , NEEDS ENGLISH NRT ENTRY TESTING					
identification procedures) An immigrant student is one who outside of the United States or its territories and has beer						
schools in the United States for less than three complete	academic					
years. Item marked with an (M) is required for identification students.						
3. In Part B, an answer of a language other than English to either	er question placed in an appropriate program within 4 weeks of enrollment.					
#1 or #2 identifies a student for oral language proficiency assessment (and written testing if entering Gr. 2-12).						



Gary L. Herod Elementary School 5627 JASON STREET • HOUSTON, TX 77096 • 713-778-3315 • ES.HOUSTONISD.ORG/HERODES

ease consider my childaching the application to this letter. I	for your Two Way Immersion Program. I anderstand that the program goals are:
Fluency in communication andAcademic achievement at or about	teracy in both English and Spanish we grade level in all content areas of other cultures while developing positive attitude among
required for the benefits of the prog	rticipation and collaboration. For that reason, I agree to the
Volunteer a minimum of ten hoAttend to school every day	trips, and other school related events
0 01	ge proficiency test for qualification purpose
Parent Signature	Date

Listed below are schedule testing and interview dates. Please indicate your *first* and *second* choice. The test is going be at Herod, and you will be notified of the date and time by mail.

There will be no additional testing dates for the 2016-2017 school year. Please arrange your plans so that you will be able to attend one of the days listed below.

First Testing Round	Second Testing Round
Feb. 18, 2017	Feb. 25, 2017