

Application for Early Kindergarten Entrance

*Lincoln Public Schools
Department of Student Services*

Please complete this application if you think:

- * that your child demonstrates academic achievement, social, emotional, and physical maturity appropriate for kindergarten placement,
- * has a birth date that occurs between August 1 and October 15,
- * and should be considered for early placement in kindergarten.

Student legal name

Preferred name

Birthdate (month/day/year)

Primary language spoken by the student

Home address City State Zip

Mailing address City State Zip

Home phone Unlisted Yes No

Who is the student living with?

Adult in household Gender: F or M

Relationship to student

Adult in household Gender: F or M

Relationship to student

Primary language spoken by the family

Student legal mother

Student legal father

Has your child previously been enrolled in kindergarten or special education? If yes, please describe.

OFFICE USE ONLY:

_____ Birth certificate attached (copy)

_____ Testing appointment scheduled: Date and Time - _____

_____ Interpreter needed: Language - _____