

# French Immersion Program Application Form

## Grade 6 Entry: Salt Spring Elementary School

Office use



**Date Received:** \_\_\_\_\_

**Initials:** \_\_\_\_\_

*This portion to be completed by Parent/Guardian*

### STUDENT INFORMATION

Student Name: \_\_\_\_\_ Gr. 5 School: \_\_\_\_\_

Gr.5 Teacher: \_\_\_\_\_

Is the student currently enrolled in French Immersion? (Y/N) \_\_\_\_\_

Does student have a sibling who is currently enrolled or has completed SD64 French Immersion? (Y/N) \_\_\_\_\_

Does a Francophone family member live in the home? (Y/N) \_\_\_\_\_

**Office Verified:** \_\_\_\_\_

**Out of District?** \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Parent 1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Please comment on why you believe French Immersion is the right fit for your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

X \_\_\_\_\_  
Parent/Guardian Signature

X \_\_\_\_\_  
Date

*This portion to be completed by the Student*

What **three** things interest you most about the French Immersion Program? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do you learn best? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you do especially well? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

X \_\_\_\_\_  
Student Signature

X \_\_\_\_\_  
Date