



INTERNATIONAL  
SCHOOL OF LOUISIANA

**2011-12 Grades 2-8 Application**  
**EASTBANK CAMPUS**

Applicant's Name: \_\_\_\_\_ Grade in 2010-12: \_\_\_\_\_

**ALL applicants wishing to apply at the International School of Louisiana for the 2011-12 Academic Year must attach the following:**

*Please check off each item as attached:*

\_\_\_\_\_ 1 proof of residency (driver's license or state ID)

**Note:** *The name and address on proof of residency must be a parent or legal guardian. Custody documentation must be included if the parent or legal guardian named is different from the one listed on the child's birth certificate.*

\_\_\_\_\_ Copy of birth certificate or passport

\_\_\_\_\_ Copy of final semester grades and attendance from previous school

\_\_\_\_\_ Copy of standardized test scores for Grades 3-8

**Application Deadlines**

Lower School Deadline (2nd - 5<sup>th</sup>) **March 25, 2011**

Middle School (6<sup>th</sup> - 8<sup>th</sup>) **March 25, 2011**

*Completed applications must be post-marked or date-stamped by the appropriate deadline. All applications received after the above dates will be placed on a waiting list. Incomplete applications will not be considered.*

**Mail or Deliver Completed Applications to:**

*International School of Louisiana*

*Attn: Admissions*

*1400 Camp Street New Orleans, LA 70130*

**APPLICATIONS ARE NOT ACCEPTED BY FAX OR E-MAIL.**

*For office use only:*

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

Received By: \_\_\_\_\_

Entered into Admit System by: \_\_\_\_\_

System Date: \_\_\_\_\_

**Application for Grades 2-8 EASTBANK CAMPUS**

**A. Applicant Data**

Child's Name (as recorded on birth certificate): \_\_\_\_\_  
Last First Middle

Primary Guardian: \_\_\_\_\_ Primary Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Entry to U.S.: \_\_\_\_\_  
(if applicable)

Child's Age: \_\_\_\_\_ Gender: \_\_\_\_\_

†  
**Preferred Immersion Language: French Spanish (choose only one)**

**Child's Race (circle all that apply):** 1) American Indian/ Alaskan Native 2) Asian 3) Black or African American

4) Hispanic 5) White 6) Native Hawaiian or other Pacific Islander

**English Language Proficiency**

English Language Proficiency:  Fully English Proficient  Limited English Proficiency

Primary Language Spoken at Home: \_\_\_\_\_

What is the first language learned by the student? \_\_\_\_\_

What language does the student use most often with other students? \_\_\_\_\_

Has the student previously attended ISL? \_\_\_\_\_ If so, what dates/grade(s)? \_\_\_\_\_

Name(s) of sibling(s) currently attending ISL: \_\_\_\_\_

Name(s) of sibling alumnus(i): \_\_\_\_\_

Name(s) of siblings also applying to ISL for the current academic year: \_\_\_\_\_

**B. Family Information**

1. Child lives with whom: \_\_\_\_\_

Does a custody order exist? \_\_\_\_\_ *If yes, a copy of the current order must be attached.*

2. **Father/ Guardian Name:** \_\_\_\_\_

If guardian, relationship to child: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Street  
City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Employment Address: \_\_\_\_\_  
Street City State Zip

3. **Mother/ Guardian Name:** \_\_\_\_\_

If guardian, relationship to child: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Street  
City State Zip

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Employment Address: \_\_\_\_\_  
Street City State Zip

**C. School or Pre-School Information**

Name of Last School or Pre-School Attended: \_\_\_\_\_

Name of Principal: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School Address: \_\_\_\_\_  
Street City State Zip Code

Grade Completed: \_\_\_\_\_

May we contact your child's current/previous school? \_\_\_\_\_  
If no, please explain: \_\_\_\_\_

#### D. Language Fluency

1. Are you aware that ISL is a language immersion school: \_\_\_\_\_

2. Does your child currently attend an immersion school: \_\_\_\_\_  
If yes, in which language: \_\_\_\_\_

If yes, please indicate whether the program is a FULL or PART TIME immersion program: \_\_\_\_\_

3. Is your child able to speak in French or Spanish appropriate to their grade level:: \_\_\_\_\_

Is your child able to write in French or Spanish appropriate to their grade level:: \_\_\_\_\_

Is your child able to read in French or Spanish appropriate to their grade level: \_\_\_\_\_

#### E. Emergency Contact Information

1. Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Alternate: \_\_\_\_\_

#### F. Household Income

Total number in household: \_\_\_\_\_ Food Stamp/FITAP # (if any) \_\_\_\_\_

##### Total Annual Income (check one):

- |   |  |
|---|--|
| <input type="checkbox"/> \$0 - \$21,000       | <input type="checkbox"/> \$34,000 - \$48,000 |
| <input type="checkbox"/> \$21,000 - \$28,000  | <input type="checkbox"/> \$48,000 - \$60,000 |
| <input type="checkbox"/> \$ 28,000 - \$34,000 | <input type="checkbox"/> \$60,000 - above    |

#### F. Parent/Guardian Signature

*I certify that I am the legal guardian of \_\_\_\_\_ and  
that the information I have given is true and correct to the best of my knowledge.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Incomplete applications will not be accepted.*

