2020-2021 STUDENT APPLICATION FOR ADMISSION

STUDENT INFORMATION (Please Print)
First Name ___________________________ Middle _______________ Last Name ___________________________
Street Address __________________________________________ APT# __________________________
City __________________________________________ State ___________ Zip __________________________

AGE AS OF 9/1/20 ________ DOB ____________ GRADE LEVEL (Circle One) K 1 2 3 4 5 6 7 8

Immersion Language Program Preference (Circle One) DAKOTA LANGUAGE OJIBWE LANGUAGE

PARENT/GUARDIAN INFORMATION
#1 Parent/Guardian
First Name ___________________________ Middle _______________ Last Name __________________________
Street Address __________________________________________ APT# __________________________
City __________________________________________ State ___________ Zip __________________________
Home Phone ___________________________ Cell Phone ___________________________ Work Phone __________________________
Relationship to Student ___________________________________ Email __________________________

#2 Parent/Guardian
First Name ___________________________ Middle _______________ Last Name __________________________
Street Address __________________________________________ APT# __________________________
City __________________________________________ State ___________ Zip __________________________
Home Phone ___________________________ Cell Phone ___________________________ Work Phone __________________________
Relationship to Student ___________________________________ Email __________________________

SIBLING/FAMILY INFORMATION
(Only list siblings and/or foster children that are also applying for admission)
Name (Last, First, M.I.) ___________________________ Relationship ___________________________ Grade
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

• Bdote Learning Center is a tuition-free publicly supported Minnesota Charter School. Students must live in Minnesota to enroll. Kindergarten students must be 5 years of age by September 1, 2020 or by November 1, 2020 if early entranced is approved to enroll and first grade students must be 6 years of age by September 1, 2020 or have previously completed Kindergarten.

• Minnesota Statute 124.D.10 subdivision 9 - Students who submit timely applications will be enrolled unless numbers exceed capacities for the selected program or grade level, in which case selection will be made by the lottery process. Enrollment preference shall be given to siblings of an enrolled student and foster children of parents of an enrolled student, and may give preference to children of school staff.

• A separate application shall be submitted for each child for whom admission is sought (i.e. not one application for the family). In a lottery situation, each student receives an individual number/lot in the lottery.

• Complete & review the application, then RETURN to Bdote Learning Center, 3216 E 29th Street, Minneapolis, MN 55406.

• All applications must be RECEIVED by 4:00 pm on March 31, 2020 to be included in the ANNUAL LOTTERY.

FOR OFFICE USE ONLY
Date Stamp & Initial & Time Received