



# C. B. Jennings Elementary Dual Language School

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## Enrichment Program Application

The program is free of charge for students  
It begins on October 11, 2016

Student's Name: \_\_\_\_\_ School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: M F

Classroom Teacher: \_\_\_\_\_ Grade: 3 4 5

Parent/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone's numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

At dismissal of the program at 3:45 pm., my child will (please check one)

Walk home: \_\_\_\_\_ Yes \_\_\_\_\_ No With: \_\_\_\_\_  
Take Program's Bus: \_\_\_\_\_ Yes \_\_\_\_\_ No Please indicate name  
Be Picked up: \_\_\_\_\_ Yes \_\_\_\_\_ No

### SCHOOL USE ONLY

Teachers Provided Information:

Reading Level on: \_\_\_\_\_ DRA \_\_\_\_\_ EDL \_\_\_\_\_ Fluency \_\_\_\_\_ Comprehension

DIBELS: \_\_\_\_\_ ISR \_\_\_\_\_ LNF \_\_\_\_\_ PSF \_\_\_\_\_ NWF \_\_\_\_\_ ORF \_\_\_\_\_ RTF

Primary instructional language: \_\_\_\_\_ English \_\_\_\_\_ Spanish

Additional information: \_\_\_\_\_

Program Coordinator: Gloria Sotomayor, Operations Manager

Acceptance date: \_\_\_\_\_

