



ARJIGA ISQORISTA EE BARNAMIJKA
FURSADHA ISQORISTA EE DUGSIYADA DEGMADA
(APPLICATION FOR ENROLLMENT – SCHOOL DISTRICT ENROLLMENT OPTIONS PROGRAM)

ED-01861-21

AKHBAAR GUUD IYO TILMAAN-BIXINNO: Ardada dhigata dugsiyada barbaarinta ilaa darajada laba iyo tobanaad iyo caruurta aan weli garin da'da barbaarinta ee itaalka daran waxay aadi karaan dugsi ka baxsan degmada ay degganyihiin (Minn. Stat. § 124D.03). Ardaygiiba hal arji u isticmaal.

Waalidka/Masuulka: Degmada weydiiso barnamijyada iyo akhbaarta dugsiyada, dugsiyada soo booqo, oo weydiiso maamulayaasha, barayaasha, waalidka iyo arada. Waxaa kaloo booqan karta Shabakadda Interneta ee Waaxda Waxbarashada oo ah <http://education.state.mn.us> si aad uga heshid akhbaar ku saabsan dugsiyada degmada, dugsiyada iyo barnamijyada dugsiyada. Haddii aad wax caawimo ah aad u baahantahay so wac Fursadha Isqorista (Enrollment Options) oo ah (651) 582-8471.

Marka aad go'aansatay inaad codsatid, waa inaad u sheegtid dugsiyada uu cunugaaga hadda dhigto inaad damacsantahay inaad dugsi degmo kale ku yaala aad codsi isqoris ah.

Dhammeystir qaybta 1aad oo sixiix qaybta 2aad. Arjiga dhammeystiran u dir **degmada aadan degganayn (ha u dirin Waaxda Waxbarashada)**. **Arjiga degmada aadan degganayn aad u diraysid waa in uusan ka dib marin Janaayo 15keeda** oo la isku qorayo sanad dugsiyeedka bilaabanaya sanadka xiga. Haddii aad ka dib martid wakhtiga la gooyay ee Janaayo 15da, la xiriir degmada aadan degganayn si aad ku ogaatid haddi uu jiro xeer kuu ogolaanaya inaad wakhtiga kama dambaysta ka dibmartid.

Waxaad filan kartaa inaad ogolaanshaha ama diidmada inaad ka heshid degmada aadan degganayn inta aan la gaarin **Febraayo 15da**. Marka aad heshid ogolaanshaha arjigaaga waa inaad intaa aan la gaarin **Maarso 1da** u sheegtid inaad degmada degganayn ballanqaadkaaga ahaa inaad aadaysid sanad dugsiyeedka xiga.

QAYBTA 1aad: WAXAA BUUXINAYA WAALIDKA AMA MASUULKA ARDAYGA [SECTION 1: TO BE COMPLETED BY THE STUDENT'S PARENT OR GUARDIAN]		
Magca Waalidka/Masuulka (Dambe, Koobaad, Xaraf Bilowga Magaca Dhexe) <i>[Parent/Guardian Name (Last, First, M.I.)]</i>		Lambarka Telefoonka <i>[Telephone Number]</i> Guriga <i>[Home]:</i> () - Shaqada <i>[Work]:</i> () -
Cinwaanka Waalidka/Masuulka <i>[Parent/Guardian Address]</i>		Magaalada/Gobolka/Lambarka Qaaska <i>[City/State/Zip Code]</i>
Deggan Degmada <i>[Resident District]</i>		Magaalada <i>[City]</i>
Degmada La Doortay (Dugsiga Degmada Aadan Dagganayn) <i>[District of Choice (Non-Resident School District)]</i>		
Magaca Ardayga (Dambe, Koobaad, Xaraf Bilowga Magaca Dhexe) <i>[Student Name (Last, First, M.I.)]</i>	Taariikhda Dhalashada <i>[Birthdate]</i> Bisha. <i>[Mo.]</i> ____ Maalinta <i>[Day]</i> ____ Sanadka <i>[Year]</i>	Jinsiga <i>[Gender]</i> <input type="checkbox"/> L <i>[M]</i> <input type="checkbox"/> DH <i>[F]</i>
Dugsiga Ha dda La Dhigto Ama Kii Ugu Dambayay <i>[School Currently Attending or Last Attended]</i>	Darajada (u hadda yahay) <i>[Grade (as of today's date)]</i>	Xaalado Khaas ah (khasab ma aha) <i>[Special Needs (optional)]</i>
Sababta Codsashada: (Tan waxba uma dhimayso ogolaanshahaaga) <i>[Reason for Request: (This does not affect your acceptance)]</i>	Soo tax dugsi(ga/yada) aad dooratay ee degmooyin kale ku yaalla <i>[List school(s) choice(s) in non-resident district in order of priority]</i> 1. _____ 2. _____ 3. _____	
<p>Ardada Minneapolis ee dalbanaya inay isku qoraan qorshaha "Choice is Yours", ma mudanyahay qada lacag la' aan ah ama mid qiimaha la dhimay? <i>[For Minneapolis students applying for the "Choice is Yours" plan, do you believe your child qualifies for free or reduced price lunch?]</i> Maya <i>[No]</i> <input type="checkbox"/> Haa <i>[Yes]</i> <input type="checkbox"/> Ma garanayo <i>[Don't Know]</i> <input type="checkbox"/></p> <p>Degmoyin kale arji ma u qoratay? <i>[Are you applying to other districts?]</i> Maya <i>[No]</i> <input type="checkbox"/> Haa <i>[Yes]</i> <input type="checkbox"/></p> <p>Haddii haa, dem(ada/oyinka): <i>[If yes, which district(s):]</i> _____</p>		

QAYBTA 2aad: SUGIDDA AKHBAARTA WAALIDKA/MASUULKA [SECTION 2: PARENT/GUARDIAN VERIFICATION OF INFORMATION]	
<p>Waxaan halkaan ku caddaynayaa in akhbaarta kor ku qoran ay inta aan ka ogahay kana aaminsanahay ay tahay sax iyo run. <i>[I hereby verify that the above information is true and correct to the best of my knowledge and belief.]</i></p>	
_____	_____
<i>Sixiixa – Waalidka/Masuulka [Signature – Parent/Guardian]</i>	<i>Taariikhda [Date]</i>

Non-Resident District: Complete Section 3. The non-resident district must notify parents/guardians by **February 15** of approval or disapproval of application. After receipt of commitment to attend, the non-resident district must notify the resident district by **March 15** of the student's intent to enroll. Copies of all disapproved applications must be sent to the Department of Education.

QAYBTA 2aad: SUGIDDA AKHBAARTA WAALIDKA/MASUULKA [SECTION 3: TO BE COMPLETED BY THE NONRESIDENT DISTRICT]		
Date of Receipt of Application	District Name	District Number
Contact Person	Title	Telephone Number () -
<input type="checkbox"/> APPROVED ¹ <input type="checkbox"/> DISAPPROVED²		
_____ <i>Signature - Superintendent / Responsible Authority</i>		_____ <i>Date</i>
¹ On the basis of information provided in the above application, and with respect to district criteria, policies and procedures, the above student will be assigned for enrollment in _____ on _____ at _____ <i>School Building Name Starting Date Grade Level</i> Please visit the district offices at least ten (10) days prior to the above starting date for completion of all enrollment forms.	² The above district is unable to approve your request for enrollment for the following reason(s): <input type="checkbox"/> Lack of capacity in a building <input type="checkbox"/> Lack of capacity in a program <input type="checkbox"/> Lack of capacity in a class <input type="checkbox"/> Already reached enrollment set by law	