



# COMPTON UNIFIED SCHOOL DISTRICT

**Transportation**  
(check box)

## Newcomer Program Application 2022-2023

\_\_\_\_\_  
Student Last Name                      First Name                      MI                      Grade

\_\_\_\_\_  
Street Address                      City                      Zip Code                      Date of Birth

\_\_\_\_\_  
Phone Number                      Current School of Residence

\_\_\_\_\_  
Emergency Contact Name                      Relationship to Student                      Phone Number

I request that my child be placed in the Newcomer Program to be instructed in English with primary language support.

*I, the undersigned parent, guardian or caretaker of the child named above, certify that all of the information provided above is true to the best of my knowledge and belief.*

\_\_\_\_\_  
Parent/Guardian Name (Print)                      Parent/Guardian Signature                      Date

I have been informed and I decline that my child be placed in the Newcomer Program.

\_\_\_\_\_  
Parent/Guardian Name (Print)                      Parent/Guardian Signature                      Date

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**FOR ENGLISH LEARNER SERVICES DEPARTMENT USE ONLY**

ELPAC Overall Score \_\_\_\_\_

Primary Language Assessment Score \_\_\_\_\_

US School Enter Date \_\_\_\_\_

Number of Years in US Schools \_\_\_\_\_

Approved for (Circle One)                      Dominguez High                      Bunche Middle

