Emerson High School Application Process, 2026-27

Thank you for your interest in our program. Emerson High school accepts students seven times per year at specific dates as listed below. Emerson HS is a Choice school in the Lake Washington School District, and students must complete a three-step process to enroll at our school:

1) Turn in a completed application, with all documents attached; applications are available online at www.lwsd/schools/emhs or at LWSD high school counseling offices. "Completed" means **all sections** are completed, signed and dated, including the counselor statement and BECCA coordinator statement and all documents are included. Applications, whether emailed, handed in, faxed or mailed, are **due by 3pm on the due date for the session you wish to start; the dates are listed below.** There is no new enrollment in Session 8. The required documents are listed on the first page; not all documents listed will apply to all students. You can obtain them at the time your counselor or associate principal completes their portion of the application. Please note that IEP (Instructional Education Plan) status will be ascertained for all applicants to ensure we can meet minutes of service and SDI in qualifying areas. *

2) Student and parent/guardian attend a meeting with our principal; the appointment will be scheduled when the application is complete. At this meeting, the principal will approve or deny the student to begin Intake.

3) Successfully complete our Intake class, held after school from 3:45-5:00pm, the week before the session for which you are applying begins. You must attend every day of the Intake class and be on time to qualify to start the next session.

*** We are unable to accept applications from students who have an IEP and live outside the Lake Washington School District.**

Session #	Application Deadline Due at 3pm on these dates:	Interview Window	Dates of Intake (No Intake on Wednesdays)	Session Start Date
1	**M AUG 10, 2026**	AUG 11-21	AUG 27, 28 2-4 PM	**AUG. 31, 2026**
2	**W SEPT 16, 2026**	SEP 4-18	SEPT 28, 29, OCT 1	**OCT 5, 2026**
3	**W OCT 14, 2026**	OCT 9-23	OCT 26, 27, 29	**NOV 4, 2026**
4	**TH NOV 12, 2026**	NOV 12-24	NOV 30, DEC 1, 3	**DEC 7, 2026**
5	**W JAN 6, 2027**	JAN 6-15	JAN 15, 19, 21	**JAN 25, 2027**
6	**TH FEB 4, 2027**	FEB 4-19	FEB 22, 23, 25	**MAR 1, 2027**
7	**W MARCH 17, 2027**	MAR 17-26	MAR 29, 30, APR 1	**APR 5, 2027**

2026-27 EMERSON HIGH SCHOOL APPLICATION

www.lwsd.org/EmHS **425-936-2300**

Please submit the completed application to:

Emerson High School
10903 NE 53rd Street
Kirkland, WA 98033

Office Use Only

District Status: _____

Date Received: _____

Meeting with Principal: _____

Registrar:
EmersonHSRegistrar@lwsd.org

SECTION I

Student Name: _____ Home School: _____
Last First

Referred by: _____ Date: _____

INSTRUCTIONS:

Please submit your application when it is complete. Your application will be complete **when all the following items are attached.** Please see the Application Process page for due dates and times:

1. Sections I, II, V and VI completed by parent/guardian and student; Sections III and IV completed by **counselor or administrator and Becca Coordinator** at current/most recent school attended.

2. **All documents listed below** as applicable. Please note that IEP status will be determined for all applicants.

- Official transcripts from all high schools attended
- SBA Math & Literacy and WCAS test scores
- IEP
- 504 plan

If last school attended was not in the LWSD, please also submit:

- One year of attendance records from most recent school
- WA state immunization record

SECTION II

Student Name _____ Birth date _____ Current Grade _____

Preferred pronouns _____ Preferred Name _____

Current or last school attended _____ Student cell phone _____

High schools attended outside Lake Washington School District _____

Guardian 1 name _____ Relationship to student _____

Address _____ City_____ State _____ Zip_____

Email address _____

Cell phone _____ Home phone _____ Work Phone _____

Guardian 2 name _____ Relationship to student _____

Address _____ City_____ State _____ Zip_____

Email address _____

Cell phone _____ Home phone _____ Work Phone _____

SECTION III Counselor or Administrator Statement from Current or Last School Attended

Length of time known or observed student _____ IEP, 504, or ML services? Yes ___ No ___

Strengths (academic, personal, extracurricular, social/emotional)

_____

_____

Challenges (academic or other) _____

Has this student been suspended or expelled for safety or security reasons (theft, harassment, weapons, drugs, violence)? If yes, dates and description _____

_____

_____ Date eligible to re-enroll _____

Signature _____ Title _____ Date _____

SECTION IV BECCA Coordinator Statement

Current BECCA status: _____

Signature _____ Date _____

SECTION V Parent/Guardian Statement

Student Name: _____
(Please Print)

Please list what you believe are your student's strengths and challenges.

_____

_____

_____

_____

_____

Please explain why you believe Emerson High School is a good educational option for your student at this time.

_____

_____

_____

_____

_____

_____

_____

Is there a parenting plan regarding educational decisions for your student? Y/N ___ If yes, please provide a copy at intake.

NOTE: Transportation is not provided. Students are eligible for a free Metro/Orca bus pass.

How did you or your student hear about EmHS? School counselor/teacher ___ Internet _____Media _____Friend

Other:_____

Parent/Guardian Signature: _____ Date:_____

SECTION VI

STUDENT STATEMENT

Student Name: _____
(Please Print)

Please write your statement, sign, and date below. You may use more than this sheet to write your statement.

Describe your experience with school up to this point (what has worked, what has not worked).

Please describe your success/strengths academically and socially.

Please describe your challenges in both academic and social/emotional areas.

What habits and characteristics will help you be successful at Emerson? What will you do to make success possible? Please be specific.

How do you believe Emerson High School will help you be successful?

Student Signature: _____ **Date:** _____