

Yakutat Tlingit Tribe

P.O. Box 418 606 Forest Hwy # 10 Yakutat, Alaska 99689 Fax: (907) 784-3595



Haa Yaakwadaat Lingít Yoo X'atángi Kúdi

Child Information

Lingít Saayí (Tlingit Name)

Dleit Káa Saayí (English name)

Date of Birth

Gender

Ethnicity (Select all that apply): ___ White ___ Asian ___ African American ___ American Indian
___ Alaska Native ___ Hawaii/Pacific Islander ___ Other

Child's Clan (circle one): Shangukeidí Wooshkeetaan Galyáx Kaagwaantaan

Teikweidi L'uknax.ádi K'inéix Kwáan/Kwáashk'i Kwáan Other:

Child's Father's Clan (circle one) Shangukeidí Wooshkeetaan Galyáx Kaagwaantaan

Teikweidi L'uknax.ádi K'inéix Kwáan/Kwáashk'i Kwáan Other:

Tribal Enrolment

Tribal child is enrolled in: _____

Enrollment number: _____

My child is not yet enrolled, but is enrolling in _____ Tribe

My child is not eligible for Tribal enrollment, but is a Tribal descendent.

Tribal descendent from _____ Tribe. Direct relationship (grandparent, etc.)

Enrollment number (if known): _____



Primary Parent/Guardian Information

Name

Name

Mailing Address

Mailing Address

Home Cell Work

Home Cell Work

E-mail

E-mail

Emergency Contacts

Name

Name

Relationship to child

Relationship to child

Home Cell Work

Home Cell Work

Parent/Guardian Statement

By filling out and submitting this application, I acknowledge that it does not guarantee admission to the school; and that the child on the behalf which I have applied be accepted, it is a commitment by myself and all other members of my household to learn the Lingít language with said child so that they may continue their language use and growth outside of the school, and that the use of the language in the school should not be hindered or diminished.

Parent/Guardian Name Print

Parent/Guardian Name Print

Parent/Guardian Name Signature Date

Parent/Guardian Name Signature Date



Haa Yaakwadáat Lingt Yoo X'atangi Kúdi

Student eligibility will be scored using a point system and will be based on 1) Age 2-7 years
2) Level of prior exposure to the Lingít language 3) Tlingit & Haida Head Start Enrollment status/tribal membership. The levels of prior exposure of the Lingít language will be determined through baseline assessments to be conducted informally through an interview with project staff and the applicant's family.

It will be preferable that students are enrolled in the Tlingit & Haida Head Start program as Releases of Information forms will be gathered from parents in order to share immunization and dental record information to satisfy the State of Alaska standards of Child Care Center requirements. However, parents will have the opportunity to submit all necessary proof of immunization and additional required health information needed for student record documentation. Student applicants who are tribally enrolled will have preference for enrollment in the language nest.

Should families of enrolled students move away or a child drop out of the program, a child will be selected from a waiting list that will be developed upon receiving initial Language Nest applications. Wait list students will be selected based on age, level or prior experience to the Lingít language and Tlingit & Haida Start enrollment status/tribal membership.

The following questions are to establish a basic understanding of students experience and knowledge. A follow up informal interview may be asked for families who are considered for enrollment.

Lingít Language Proficiency

Please check all that apply.

- Child speaks and understands some Lingít
- Parent/Guardian has taken Lingít community courses in high school or college
- Parent/Guardian/Extended family members understands and speaks some Lingít
- Other member (s) of the child's immediate household are proficient speaker (s) of Lingít

Name, relationship to child & language knowledge: _____

Name, relationship to child & language knowledge: _____

Name, relationship to child & language knowledge: _____

- Parent/Guardian does not understand or speak Lingít



Haa Yaakwadaát Lingt Yoo X'atangi Kúdi

Haa Yaakwadaát Lingít Yoo X'atangi Kúdi requires 500 hours of contact from each student per year. The staff will be tracking completion of the hours and both parents and staff must work to ensure your child stays present in the school as much as possible in order to complete the required hours. Unfulfilled Hours: There will be opportunities for students to 'catch up' on hours missed through the mini-immersion events as well as 2 hour family dinner nights for all participants as needed to get the required hours.

The Parent(s)/Guardian(s) understand the following: (Please Initial)

_____ I understand that my child is required to complete 500 hours of immersion time in the language nest.

_____ I understand that our child may be dropped from this program if participation is non-apparent from either family of child.

_____ I understand that the Lingít immersion program will be conducted entirely in the Lingít language.

_____ I will respect the integrity of the language nest immersion environment and will not speak English when in the classroom.

_____ I understand that we may be called on to volunteer in the language nest from time to time.

_____ I understand that as a family, phrases will be sent home and will be intended for use with our child to help them on their path to proficiency and eventual fluency.

_____ I will encourage my family to support my bilingual child to speak Lingít outside the classroom.

_____ I understand that we (parent(s)/alternative) will be required to participate in a minimum of 26 hours per year in the bi-monthly Lingít Language dinners.

_____ I understand a parent and/or family member will be expected to attend evening meetings held regularly if my child is accepted.

Please list family member(s) who will be participating:

| | | | |
|---------------------------------------|-------|--------------------------------|-------|
| _____ | _____ | _____ | _____ |
| Primary: Name & relationship to child | Date | Alternate: Name & relationship | Date |

| | | | |
|----------------------------------|-------|--------------------------------------|-------|
| _____ | _____ | _____ | _____ |
| Signature of Primary Participant | Date | Signature of Alternative Participate | Date |



Haa Yaakwadáat Lingt Yoo X'atángi Kúdi

We encourage family involvement in Haa Yaakwadáat Lingít Yoo X'atángi Kúdi and we have organized times and places to understand what your child will be learning and know what to expect at home once your child becomes bilingual.

Please note that English speaking will not be allowed or tolerated in operation hours. Tlingit language will be the only mode of communicating. Should non-Tlingit speakers like to communicate, please write a note or use sign language of some kind to indicate a meeting with a teacher outside of the Tlingit speaking and teaching area.

Parent/Guardian Signature

Date

Parent/Guardian Name Printed

Please tell us a little bit about why you want your child to attend the language nest:

