



School Year _____

Application for Open Enrollment/Choice

Complete a separate form for each student.

Student Name _____ Birthdate _____ Current Grade Level _____

Parent/Guardian Name _____

Parent/Guardian Address _____ City _____ Zip _____

Parent/Guardian Home Phone _____ Parent/Guardian Work Phone _____

School of Residence (Assignment): _____

School student would like to attend next year: _____

Please indicate reason for request: _____

- | | Yes | No | |
|---|--------------------------|--------------------------|---------------------------|
| • Are you a resident of District seeking Open Enrollment? | <input type="checkbox"/> | <input type="checkbox"/> | |
| • Are you a non-resident seeking Open Enrollment? | <input type="checkbox"/> | <input type="checkbox"/> | Resident District: _____ |
| • Did the student attend the requested school last year? | <input type="checkbox"/> | <input type="checkbox"/> | |
| • Is a sibling enrolled at the requested school? | <input type="checkbox"/> | <input type="checkbox"/> | Name/Current Grade: _____ |

Requests will be granted on a space available, and on a first-come, first-served basis. (Reference policy JFBA and JFBA-R, Intra-District Choice/Open Enrollment).

Additional Information

Does your child require special education services? Yes No

If yes, which program(s)? _____

Has this student been expelled/suspended from school in the last 12 months? Yes No

If yes, please explain _____

I understand and agree that if my open enrollment/choice request is granted:

- 1) This request will be valid for the above school year only.
- 2) I am responsible for providing my child's transportation to and from school.
- 3) Approval of this application is for the above-named student only. It does not insure approval of siblings.
- 4) Requests can be denied based on student attendance and behavior issues.

I understand and accept the conditions listed above.

Parent/Guardian Signature

Date

For school use only:

Date Received: _____

Approved: _____ Date: _____

Denied: _____ Date: _____

Principal's Signature