

OPEN ENROLLMENT NOTIFICATION/APPLICATION FORM

The Open Enrollment Act provides parent options for student attendance. Those parents of students at one of the 1,000 Open Enrollment schools identified for the school year have the option to request transfer to another school with a higher API score within the district or outside of the district. Once enrolled by the school of choice, the student may remain until the highest grade served by that school without the need to reapply even if the school of origin is no longer identified as an Open Enrollment school. Transportation is not provided.

Although it is not necessary to request permission to leave an Open Enrollment school, it is in everyone's best interest that you notify the school of residence of your intent to seek enrollment at another school for the following reasons: 1) to ensure that all student records will be ready for transfer to the new school of enrollment without delay; and 2) to allow the school of residence and the student to plan accordingly for the following school year.

By completing this form, you are *either notifying the school of residence of your desire to seek enrollment for and/or are requesting to enroll* your student at another school with a higher API score within the district or outside of the district. *(Include submission deadline and time frame for the selection process and acceptance/rejection response.)*

This form is being submitted to indicate a:

- Desire to transfer to another school (*check all that apply*): within the (*District*) outside of the (*District*)
- Request to transfer to another school within the (*District*)
- Request to transfer from another district into this (*District*)

Please print.

School Year: 2011 - 2012	Grade Requested	Date of Request
Student Name (Last, First)	Birth Date	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Current or Last School of Attendance	Current or Last District of Attendance	
School of Residence	District of Residence	
School Requested	District Requested	
Parent/Guardian Name	Contact Number: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
Email Address	Contact Number: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	
Address	City/Zip	
Is the student currently pending disciplinary action or under an expulsion order? <input type="checkbox"/> Yes <input type="checkbox"/> No		
What special services has the student received? (<i>Check all that apply and attach proof of enrollment in the special program.</i>) <input type="checkbox"/> Gifted (GATE) <input type="checkbox"/> Section 504 <input type="checkbox"/> Special Education <input type="checkbox"/> English Language Learner		
If the student is receiving Special Education services, what is the current placement? (<i>Please attach IEP.</i>) <input type="checkbox"/> Special Day (SDC) <input type="checkbox"/> Resource (RSP) <input type="checkbox"/> Non-Public School (NPS) <input type="checkbox"/> Pending Assessment		

Parent/Guardian Signature _____ Relationship to Student _____

*****For Office Use Only*****

Date received: _____ Received by (print name & initial): _____

Request granted; student placed at: _____

Request denied; letter of response sent on: _____