

**WINSLOW UNIFIED SCHOOL DISTRICT NO. 1
OPEN ENROLLMENT**

ATTENDANCE APPLICATION

File this application at the School District office

Student's name _____
 Last First M.I.

Grade for next school year _____ Birth date _____ Home phone _____

Parent's name _____
 Last First M.I.

Work phone _____ Message phone _____

Mailing Address _____
 Address City State Zip

Physical address _____
 Street City

E-mail address _____

The above-named student: resides outside the School District; or
 resides within the School District

Present school of attendance

School _____ District _____

City _____ County _____

Request assignment to _____ **School**

If 9th – 11th grader, how many credits has student earned? _____

Is the above-named student:

- Yes No Expelled or long-term suspended from any school or school district?
- Yes No Currently subject to expulsion or long-term suspension from a school or school district?
- Yes No N/A In compliance with conditions imposed by a juvenile court?
- Yes No N/A In compliance with a condition of disciplinary action in any school or school district?
- Yes No Receiving, or being considered for any special services (ie., English language learner, special education services, 504 plan, gifted)?

(CONTINUE APPLICATION ON REVERSE SIDE)

Note: The following conditions apply to the open-enrollment program:

1. An attendance application must be completed and submitted on or before May 15.
2. If the applicant has an Individualized Education Plan (IEP) or a Section 504 Plan, it must be provided to the District within five (5) working days of the date of the application. Failure to do so will result in a determination that the application is incomplete.
3. Enrollment is subject to the capacity limit established for the school and/or its grade levels.
4. On or before July 15, the parent or legal guardian will be notified in writing whether the application has been accepted, rejected, or placed on a waiting list.
5. Transportation for the student may be the responsibility of the parent or legal guardian, except as provided by the student's Individualized Education Plan (IEP) or Section 504 Plan.
6. Providing false information on this form will result in the application being denied or admission being revoked. The parent/guardian signing this application affirms that the student seeking enrollment will abide by the rules and regulations that govern students at the school where the student seeks enrollment.

Failure to comply with school and District rules could lead to revocation of open enrollment status.

Signature of Parent or Legal Guardian

Date

FOR DISTRICT USE ONLY -- DO NOT WRITE BELOW THIS LINE

Student number _____

Date stamp _____

Filing Date

Accepted

Placed on waiting list

Rejected

Reason for rejection _____

Signature of Superintendent (prior to the beginning of school)

Date

Copies to applicant and school by: _____

Date

Signature of Principal (after beginning of school)

Date

Copies to applicant and Superintendent's office by: _____

Date