

# For 2023-2024

## JACKSON-MILTON LOCAL SCHOOL DISTRICT OPEN ENROLLMENT POLICY

### STUDENTS

#### Open Enrollment

The Jackson-Milton Board of Education believes that students under certain circumstances can benefit from open enrollment. Therefore, students from all other districts in Ohio will be considered for open enrollment in accordance with this policy. The following guidelines, based upon recommendations of the Jackson-Milton administration and the Ohio Department of Education, shall govern the transfer to students to the Jackson-Milton Local Schools. Students entering grades K-12 will be considered for open enrollment.

#### Procedures

1. The general application period for open enrollment consideration is during the months of May and June preceding the school year being requested. A separate application must be submitted for each student. Applicants will be notified in writing of enrollment decisions by the Superintendent of Schools.

Students will be considered for acceptance based on the following criteria:

- a. students who have siblings already enrolled under this program.
  - b. student of staff members.
  - c. students who have grandparents residing in the district.
  - d. students of community employees
  - e. students of former graduates
  - f. students with the earliest application date
2. A student will not be permitted under this policy if the enrollment of the grade level being requested is at full capacity as deemed by the administration. (Allowance must be made for new students moving into the District).
  3. Once accepted, students will not be displaced should enrollment exceed the limits stated above, except as a result of disciplinary action permitted by law.
  4. Parents will be required to provide transportation for their child(ren).
  5. A student will not be admitted in to the Jackson-Milton Local Schools if the student is under expulsion and/or has been suspended for any reason for ten (10) consecutive days during the current or previous school years.

6. You must contact the appropriate building to complete additional forms and paperwork at the school the student will be attending.
7. Applications are approved for one (1) school year only. Students must reapply each year for open enrollment.
8. A special education student will be denied open enrollment if the student requires special services which are not currently available in one of the Jackson-Milton school buildings if the district special education enrollment is at capacity.
9. OHSAA Athletic eligibility guidelines will be in effect.
10. A student must meet all the graduation requirements established in policy by the Jackson-Milton Local Board of Education and the State of Ohio in order to graduate from Jackson-Milton High School.
11. Applications received outside of the general application period will be considered on a case by case basis.
12. Applicants may be rejected if the racial balance of either the sending or receiving school district would be negatively impacted.
13. Open enrollment may be discontinued at the discretion of the Board of Education.
14. Exceptions to the above rules will be made at the sole discretion of the Superintendent.

Legal Reference: ORC 3313.64  
3313.65  
3313.98

JACKSON-MILTON LOCAL SCHOOL DISTRICT

2023-2024

OPEN ENROLLMENT APPLICATION

Check One: New Application \_\_\_\_\_ Re-Application \_\_\_\_\_ (Complete Application Only. If no changes in the last year, no further documentation required)

Name of Student \_\_\_\_\_ Date Submitted \_\_\_\_\_

Custodial Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_

Grade Level of Student Next School Year \_\_\_\_\_ Does Student Have an IEP? \_\_\_\_\_

School District of Resident \_\_\_\_\_ School Last Attended \_\_\_\_\_

Name of Siblings and Grade Level:	If enrolling for special high school courses or special education courses, Please list the desired classes:
_____	_____
_____	_____
_____	_____

Answer – YES or No

- A. \_\_\_\_\_ Does parent or guardian work for the Jackson-Milton Board of Education?
- B. \_\_\_\_\_ Do grandparents or relatives reside in the Jackson-Milton School District?  
Name \_\_\_\_\_
- C. \_\_\_\_\_ Does either parent work in the Jackson-Milton Community?  
Company Name \_\_\_\_\_
- D. \_\_\_\_\_ Is parent(s) a graduate of Jackson-Milton? Year \_\_\_\_\_

I understand that I must submit copies of the following information in order for this application to be complete and acceptable:

1. Birth certificate of child being enrolled
2. Proof of grade placement – current report or school records
3. Proof of child custody or guardianship (if applicable)
4. Proof of immunization
5. Proof of Social Security Number

Please circle and attach photocopies of appropriate documentation – one from each column:

<u>Column 1</u>	<u>Column 2</u>
<ol style="list-style-type: none"> <li>1. House closing papers</li> <li>2. Deed</li> <li>3. Mortgage documents</li> <li>4. Building permit(s)</li> <li>5. Rental agreement/lease</li> <li>6. Notarized Parent Residency Affidavit (on back)</li> </ol>	<ol style="list-style-type: none"> <li>1. Two current utility bills</li> <li>2. Two current charge statements</li> <li>3. Drivers license</li> <li>4. Tax statement</li> </ol>

I UNDERSTAND THAT THE FALSIFICATION OF ANY OF THE ABOVE INFORMATION WILL VOID THEIR OPEN ENROLLMENT APPLICATION. PLEASE TURN IN THE APPLICATION TO THE PRINCIPAL OF THE JACKSON-MILTON SCHOOL BUILDING THE STUDENT WOULD LIKE TO ATTEND.

\_\_\_\_\_  
SIGNATURE – CUSTODIAL PARENT/GUARDIAN

State of Ohio )  
 )  
County of Mahoning )

I, \_\_\_\_\_, having been duly sworn and deposited, hereby state and affirm the following:

1. I am the parent of \_\_\_\_\_
2. I have legal custody of my above-named child, and s/he presently resides with me.
3. My "legal residence" (address) is  
\_\_\_\_\_  
(Street Number and Street) (City) (State) (Zip Code)
4. For purpose of Affidavit, I intend the term "legal residence" to refer to the location where I eat my meals, sleep on a regular basis, receive my mail, and, if applicable, where I am registered to vote.
5. I am the owner/lessee of the address specified above.

FURTHER AFFIANT SAYETH NAUGHT.

\_\_\_\_\_  
\_\_\_\_\_, Affiant

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**NOTICE: READ CAREFULLY** – Knowingly falsifying this document is a violation of Ohio Revised Code Section 2921.13(A) which is a FIRST DEGREE MISDEMEANOR punishable by a prison return of six (6) months and/or a fine of up to \$1,000.00. Further the Affiant will be charged (and prosecuted in court, if necessary) to collect all back tuition to the Jackson-Milton Local Schools for all days my child(ren) illegally attended school.

**For Office Use Only**

Received by \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Principal's Recommendation:    Approved \_\_\_\_\_    Deny \_\_\_\_\_

Reason(s): \_\_\_\_\_  
\_\_\_\_\_

Principal Signature/Date: \_\_\_\_\_

Superintendent's Decision:    Approved \_\_\_\_\_    Deny \_\_\_\_\_

Signature/Date: \_\_\_\_\_

No student shall be denied admission to the Jackson-Milton Local School District or to a particular course or instructional program or otherwise discriminated against for reasons for race, color, national origin, sex, disability, or any other basis of unlawful discrimination.