

Request for Open Enrollment/Transfer

Date _____

School year _____

Student name _____ Grade level _____

Parent(s) name _____

Address _____ City _____ ZIP _____

Home phone _____ Work phone _____

Home school _____

School requested _____

I have received the above request and: _____ approve

_____ deny for the following reason:

If approved, the student is expected to abide by all attendance and behavior regulations of _____ school.

Administrator signature

Date

As the parent of the above-named student, I understand:

- Enrollment is contingent upon a student's providing his own transportation
- An open enrollment will be valid throughout the grades served by the school
- A transfer will be valid for no more than one academic year
- Approval of this request is for the above-named student. It does not insure approval of siblings.

Parent signature

Date