

**OPEN ENROLLMENT APPLICATION**  
**DATE/TIME RECEIVED: \_\_\_\_\_**

For School Year 20\_\_\_\_ - 20\_\_\_\_  
Grade \_\_\_\_\_

\*Note: For out-of-district applicants, a copy of the students cumulative record may be requested

( ) Out of District Application

( ) In-District Transfer Application

Name of Proposed Receiving School: \_\_\_\_\_  
*(Some specialized programs are only offered in a limited number of schools, e.g. special education, English Language Learner, pre-school, etc. Contact Middleton School District office for further information)*

1. Applicant Student's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

2. School student is presently attending, or would attend if student were in a public school.  
Name of School: \_\_\_\_\_  
Address of School: \_\_\_\_\_  
Present Grade Level of Student: \_\_\_\_\_

3. Has the student ever been suspended or expelled from school or has the student committed a disciplinary violation for which he or she could be suspended or expelled? ( ) Yes ( ) No

4. Has the student had a history of disciplinary infractions? ( ) Yes ( ) No  
If YES, describe the circumstances (including dates and duration): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Has the student had a history of chronic absenteeism? *(A student is considered chronically absent if the student is absent 10% or more school days during the school year, ie averaging 1 day every 2 weeks or 18-20 days in a year on a standard 5 day week)* ( ) Yes ( ) No  
If YES, describe the circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Within 60 days following action on the application, copies will be sent to parents, building principal and, for out-of-district applicants the superintendent of the home district. If the application is denied, a written explanation for the denial will be attached.

STUDENTS

6. Reason (s) for requesting attendance in this school: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Special and/or unique instructional programs in which the applicant student is currently enrolled and which the applicant student expects to enroll in at the new school. (e.g. vocational, foreign language, remedial, special education, gifted/talented, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

8. Extracurricular activities in which the applicant wishes to participate: \_\_\_\_\_  
\_\_\_\_\_

9. Transportation arrangements that will be made by the parent/guardian: \_\_\_\_\_  
\_\_\_\_\_

10. Parent/Guardian Name: \_\_\_\_\_  
Parent/Guardian Address: \_\_\_\_\_  
Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

I have read the school district procedure on open-enrollment, and hereby request that my son/daughter be permitted to attend school indicated earlier on this document.

Parent/Guardian Signature: \_\_\_\_\_

**Misrepresentation of information on this application may result in revocation of the applicant's approval to attend a Middleton School District school.**

**Principal Signature:**

**In-District Transfer Meets Criteria**       **In-District Transfer Does not Meet Criteria**

Home School Principal Signature: \_\_\_\_\_

Receiving School Principal Signature: \_\_\_\_\_

Reason: \_\_\_\_\_

**Out-of-District Transfer Meets Criteria**       **Out-of-District Transfer Does not Meet Criteria**

Receiving School Principal Signature: \_\_\_\_\_

Reason:  School Over Capacity     Grade/Program Over Capacity     Other Considerations

If Other Describe: \_\_\_\_\_

**District Use Only**

Transfer Approved       Transfer Denied      Date: \_\_\_\_\_

Superintendent or Designee Signature: \_\_\_\_\_

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