

New Student

Change of Address

HIGLEY UNIFIED SCHOOL DISTRICT

OPEN ENROLLMENT APPLICATION
 One Student per Application
 (See HUSD Governing Board Policy JFB)

Submission Date/Time: _____

Staff Initials: _____

School Requested: _____ School Year Applying For: _____ Grade Level Applying For: _____

Reason for Request: _____

What school is your child assigned to attend based on school boundaries? _____

Current School: _____

Student's Legal Name _____ School ID#: _____ Birth Date: _____

resides **within** the Higley Unified School District
 resides **outside** the Higley Unified School District: _____
 (Name of District)

Mark All If Applicable:

_____ Resident transfer student who was not enrolled at the requested school during the previous school year.

_____ Non-resident student who was not enrolled at the requested school during the previous school year.

_____ Sibling(s) of resident transfer student OR non-resident transfer student.

Sibling Name: _____ Current Grade Level _____

Sibling Name: _____ Current Grade Level _____

Sibling Name: _____ Current Grade Level _____

Yes [] No [] N/A []	Expulsion from any school/district?
Yes [] No [] N/A []	Withdraw to avoid expulsion?
Yes [] No [] N/A []	In compliance with conditions imposed by a juvenile court?
Yes [] No [] N/A []	Receiving services under a current Individualized Education Plan (IEP)? A copy must be attached to this application if the student does not already attend a Higley Unified School.

Signing this application affirms the following:

- The student must agree to follow all rules and regulations of the receiving school, including standards for homework, student conduct and attendance.
- Grades 9-12 Only- Eligibility for athletics and extracurricular activity is affected when students transfer from one school to another. Students considering a possible transfer must contact the Athletic Director of the receiving school to determine eligibility.
- This form will be used to access information from former school districts.

Providing false information on this form may result in the application being denied or admission being revoked.

Parent's/Guardian's Name: _____

Contact Phone Number () _____ Email _____

Home Address (Street/City/Zip) _____

Parent/Guardian Signature _____ Date _____

ACCEPTANCE OF OPEN ENROLLMENT

The addition of students from outside a school's attendance area shall not detract from the offerings of the school, its programs, grade levels, or classrooms.

Parents must confirm acceptance within five (5) working days once receiving notification of acceptance. Open enrollment acceptance will be cancelled should the student miss the first ten days of school.

WHAT IS THE ACCEPTANCE PROCESS?

Acceptance of Open Enrollment applications is based on classroom availability. Using current enrollment, the district establishes each school's student enrollment, projected growth, and available space. Students who are currently enrolled, their siblings, and children of employees receive first preference.

WHAT HAPPENS IF WE MOVE OUTSIDE OF THE SCHOOL BOUNDARIES?

A student currently attending an HUSD school who moves or is identified to reside outside the attendance boundaries of the school or district will be given ten days to submit an open enrollment application. The student will have enrollment preference at the current school attending as long as attendance is continuous.

WHAT IS THE NOTIFICATION PROCESS?

Written notification will be provided to all applicants who submit completed application forms to the requested school.

TRANSPORTATION

Open enrolled students are eligible for District transportation on routes when space is available within the attendance boundaries of the school to which the student has been accepted for open enrollment transfer. It is the responsibility of the parents or guardians of the open-enrolled student to have the student at a designated pickup point within the school's transportation area. Applications are available at <https://www.husd.org/Page/12822>.

FOR SCHOOL USE ONLY	
Date Application Received _____	School _____
Student Accepted [<input type="checkbox"/>] Placed on Waiting List [<input type="checkbox"/>] Denied [<input type="checkbox"/>]	
Reason if denied: [<input type="checkbox"/>] Grade Level Full [<input type="checkbox"/>] Program Full [<input type="checkbox"/>] Student did not meet admission requirements	
Principal's Signature _____	Date of Parent Notification _____