



Bellevue School District's Advanced Learning Request for Re-Enrollment

This form only applies to BSD students that previously attended BSD and received Centered, differentiated, or domain-specific services.

Return this form via email to: advancedlearning@bsd405.org

Name of Student: _____ DOB: _____

CURRENT School: _____

BSD Student ID: _____ **CURRENT** Grade Level: _____
(If known)

MY STUDENT WAS WITHDRAWN FROM BSD ADVANCED LEARNING ON: _____
(mm/dd/yyyy)

CENTERED SERVICES

☐ I wish to have my student re-enroll in the Centered program at the following school:

- | | |
|---|--|
| ☐ Cherry Crest Elementary School | ☐ Odle Middle School |
| ☐ Medina Elementary School | ☐ Tyee Middle School |
| ☐ Somerset Elementary School | ☐ Interlake High School |
| ☐ Woodridge Elementary School | |

DIFFERENTIATED OR DOMAIN-SPECIFIC SERVICES

☐ I wish to have my student re-enroll in the attendance or choice school and receive differentiated or domain-specific services in the general education classroom at the following school:

Neighborhood/Choice School: _____

Preferred Email

Preferred Phone Number

Please type your complete name as your signature

Date

By typing your name above, you confirm that your name serves as your signature and verifies you are authorized to provide this information.

FOR OFFICE USE ONLY (below this line)

Returned to BSD: _____

☐ **APPROVED**

☐ **DENIED**

by: Director of Advanced Learning

Date