



Open Enrollment Application

5-105.A

SY 2025-2026 *Complete only if you want to attend a high school outside of your attendance zone

Student Name (First, M.I., Last) _____

Address: _____ City, State, Zip: _____

Parent/Legal Guardian (Print Name): _____

Email (required): _____ Contact Phone: _____

Current or last **school** attended: _____

Home High School/ Attendance Zone according to address: _____ High School

Select the school you would like to attend/transfer:

<input type="checkbox"/> Cibola	<input type="checkbox"/> Gila Ridge	<input type="checkbox"/> Kofa	<input type="checkbox"/> San Luis	<input type="checkbox"/> Somerton	<input type="checkbox"/> Yuma
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Grade student will be during the **2025-2026** school year:

<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	<input type="checkbox"/> 12
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If applicable, please check the following:	<input type="checkbox"/> Sibling(s) currently enrolled *same campus & school year	<input type="checkbox"/> McKinney-Vento Homeless Pupil
	<input type="checkbox"/> YUHSD Current Employee	<input type="checkbox"/> Active Duty Military Family
		<input type="checkbox"/> Foster Care Pupil

If your application is not approved for the first semester , would you like your application to remain active to be considered for the second semester ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the student participating in athletics? Approval of this request may affect the applicant student's athletic eligibility at the new school. Contact the Athletic Director at the school of interest for more information.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the student been expelled, long-term suspended, currently being considered for expulsion or long-term suspension from any school or district, or is out of compliance with any condition imposed by any court?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

THE FOLLOWING CONDITIONS APPLY TO OPEN ENROLLMENT:

1. This application must be completed and delivered to the school of your choice or the district office to be considered.
2. The parent will be notified by email of the status and if open enrollment is not granted for the next semester.
3. The application shall be complete and accurate. Providing false information will cause the application to be denied or open enrollment to be revoked.
4. **Unless specific arrangements are made in advance, the parent/legal guardian will be responsible for transportation to and from the new school.**

attest that the above information is true and correct. I understand that there may be a waiting period prior to approval.

Parent/Legal Guardian Signature: _____ Date: _____

For District Use Only	No. Assigned:	
Received	Action Taken	
Date:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Time:	Date:	