

For District/School Use Only:	
DATE RECEIVED: _____	TIME RECEIVED: _____

**NOTE: A copy of the applicant student's cumulative transcript must be attached to this application. The cumulative transcript may be obtained from the student's current school.**

Date: \_\_\_\_\_ Requested School: \_\_\_\_\_  
 Zoned School District: \_\_\_\_\_ Current School: \_\_\_\_\_

Student Information		
Student Name: Last	First	Middle
School year for request:	Grade Applying for:	Date of Birth:
Street Address:		City                      Zip Code
Mailing Address( if different):		City                      Zip Code
Parent/Legal Guardian Name	Home Phone	
Parent/Legal Guardian Email	Cell Phone	

Siblings (either already attending Notus Schools or applying to attend - (if attended Notus less than 2 years, application for **each** student is required):

	Applying	Attending
Name: _____ Grade: _____	<input type="checkbox"/>	<input type="checkbox"/>
Name: _____ Grade: _____	<input type="checkbox"/>	<input type="checkbox"/>
Name: _____ Grade: _____	<input type="checkbox"/>	<input type="checkbox"/>
Name: _____ Grade: _____	<input type="checkbox"/>	<input type="checkbox"/>

Reason for student transfer: \_\_\_\_\_

Is your student on an IEP? YES \_\_\_\_\_ No \_\_\_\_\_      Is your student on a 504 Plan? YES \_\_\_\_\_ NO \_\_\_\_\_

Has your student had a history of attendance infractions within the past three years? YES \_\_\_\_\_ NO \_\_\_\_\_

Has your student had a history of disciplinary infractions within the past three years? YES \_\_\_\_\_ NO \_\_\_\_\_

Please explain attendance and/or disciplinary infractions: \_\_\_\_\_

Will your student participate in IHSAA sanctioned activities (9th-12th grades only)? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, which sport/activity: \_\_\_\_\_

*Considerations:*

- If the student participates in any athletic program governed by IHSAA, he/she may not be eligible to participate at the new school. The parent or guardian should check [IHSAA rules](#) before submitting an application.
- The transfer request is not complete until the resident school has released the student, submitted the request to the requested school and it has been accepted. **The student should remain enrolled in the resident school until there is an effective start date at the requested school.**
- The district will notify parents of acceptance and the effective start date or denial.
- Transportation of open-enrolled students is the responsibility of the parent/guardian.

*Decision-Making Criteria, Revocation, and Appeals:*

**Space Availability** - All applications will be considered on a stringent space-available basis. In the event there is not space available in the grade level, class or program requested, the student will be placed on a waiting list in the order of the date and time of the request.

**Attendance and Disciplinary Infractions** - Open enrolled students are expected to follow all discipline and attendance policies and regulations applicable to all Notus School District students. Failure to meet these conditions may result in revocation of this Open Enrollment transfer and return to his/her resident school.

**Appeals** - Appeals of an administrator’s denial or revocation of open enrollment for students residing within the Notus School District boundary will be directed to : Superintendent, except for denials based on space availability, in which case the administrator’s decision is final.

*Acknowledgements:*

- I certify that the information provided is accurate and complete.
- I understand that approval of this request shall be dependent upon the acceptance and rejection standards stated in the district’s policy, and revocation of this transfer may occur in accordance with the conditions listed in the district’s policy.
- I understand that my student must continue to attend the resident school until the effective start date of the transfer and that nonattendance is subject to truancy procedures.
- I understand that I am responsible for providing transportation to and from school for my student(s).
- I understand that requests are approved for one school year only, and it is my responsibility to complete an Open Enrollment Continuation/Returning Student Form each year by February 1st.
- I understand that the transfer can be revoked at any time if there are attendance or discipline issues or if there is no longer space within the grade level, class or program.

I have read the school district policies and procedures on Open Enrollment and hereby request that my son/daughter be permitted to attend the requested schools.

Parent/Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature (6th-12th grades only) \_\_\_\_\_ Date \_\_\_\_\_

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

<b>For District/School Use Only -</b>	Date of Parent Notification: _____
Administrator’s Comments:	
Transfer request:    Approved _____    Denied _____    Reason for denial: _____	
_____	
Administrator’s Signature: _____    Date: _____	