



**NORTHWEST COMMUNITY SCHOOLS
DISTRICT RELEASE APPLICATION**

Student's Name _____ Date of Birth _____

Student's Address _____ Zip _____

Name of School Presently Attending _____ Grade _____

Building Requested To Attend: ☐ NWEE (PreK-2) ☐ NWEL (3-5) ☐ NWMS (6-8) ☐ NWHS (9-12) ☐ NWC (Alt. 9-12 & Virtual)

Person Requesting District Release _____

Relationship to Student _____ Phone Number _____

Email Address _____

School District in Which Student Resides _____

Has the applicant been suspended (ISS or OSS) or expelled within the last two (2) years? ☐ Yes ☐ No

Does the applicant have a felony conviction? ☐ Yes ☐ No

Does the applicant require Special Education services? Yes ___ No ___

Does the applicant have a current IEP in place? Yes ___ No ___

If yes, please identify the program/services required:

REASON FOR REQUEST: (Check all that apply)

- ☐ Collaborative Schools of Choice Program
- ☐ The parents are in the process of purchasing or building a home in the Northwest School District
- ☐ The pupil is a continuing student from the previous year and moved after the schools of choice enrollment period.
- ☐ The pupil has requested to enroll in our alternative education program.
- ☐ The pupil's parent is employed by Northwest or one of its contracted services (SFE, ABM, Dean Trans.)
- ☐ Other: Please state reason(s):

Signature of Parent/Legal Guardian Requesting Non-Resident Admission

Date

ACTION:

☐

Approved

☐

Not Approved

If not approved, please provide reason(s):

Superintendent

Date

Principal

Date