

HEATH CITY SCHOOLS
INTER-DISTRICT OPEN ENROLLMENT APPLICATION
2018-2019 School Year

(Required data as per Senate Bill 140 – Inter-District Enrollment)

_____ NEW APPLICATION
(Deadline is June 1, 2018)

_____ RENEWAL APPLICATION
(Deadline is May 11, 2018)

Today's Date: _____

1. Child's Full Name: _____ Male _____ Female _____
(Last) (First) (Middle)

2. Grade Level for 2018-2019 School Year: _____

3. Address: _____
House# Street/Road Name P.O. Box# City State/Zip

E-mail address: _____

4. Parent/Guardian Name(s): _____ Home Phone: _____
Work Phone: _____
Cell Phone: _____

5. Student's Birth City: _____ Date of Birth: _____ Social Security # _____

6. Race: Do you identify as Hispanic or Latino? ___ yes ___ no

7. Please check beside the race with which the student identifies (more than one box may be marked):

Ethnicity: ___ American Indian or Alaska Native ___ Asian ___ Black or African American
___ Native Hawaiian or other Pacific Islander ___ White

8. Native Language: ___ English ___ Spanish ___ Other _____

9. Kindergarten Experience: _____ full day _____ half day _____ none

10. District of Legal Residence: _____

11. District of Current Enrollment: _____

12. Has the student been suspended/expelled for a period of 10 or more consecutive days for the current semester or the semester immediately preceding the term for which admission is sought? ___ yes ___ no If yes, please explain: _____

13. Does the student's education program include an Individualized Education Program or 504 Plan? ___ yes ___ no

14. Is this student a foster child or ward of the court? ___ yes ___ no

15. Number of total credits earned at the end of last school year (high school only): _____

16. Check which statement applies to your child:

- a. _____ Last year my child was an Open Enrollment student at Heath City Schools
- b. _____ Sibling of last year Open Enrollment student(s)
- c. _____ New applicant
- d. _____ Former Heath resident student

NEW applicants must provide the following documentation with this application:

- Official Birth Certificate (NOT a hospital record)
 - Immunization Record
 - Custody papers (If applicable)
If you are an appointed guardian or the custodial parent for school purposes, please attach the appropriate court documents.
 - Proof of Residency (one of the following required)
 - A current purchase agreement, deed, mortgage or proof from the Licking County Auditor's website OR
 - Current rental contract/lease with the parent/guardian's names, child's name and name and phone number of the landlord
 - Current Evaluation Team Report (ETR) and Individualized Education Program (IEP) for special education (If applicable)
 - Current Copy of a 504 Evaluation and 504 Plan (If applicable)
 - A record of any suspensions or expulsions from the current and/or previous school term
 - Current Grade Card
- All forms MUST be attached for application to be considered.**

All RENEWAL applicants must provide the following documentation with this application:

- Proof of Residency (one of the following required)
 - A current purchase agreement, deed, mortgage or proof from the Licking County Auditor's website OR
 - Current rental contract/lease with the parent/guardian's names, child's name and name and phone number of the landlord
- Custody papers (if applicable)
If you are an appointed guardian or the custodial parent for school purposes, please attach the appropriate court documents.

Signature of Parent/Guardian _____

As stated in the Administrative Regulations, the Heath City School District is NOT responsible for providing bus service outside the school district to students attending under the Open Enrollment Policy. Please note that you must apply for Open Enrollment each year and approval is based on student/teacher ratios and other criteria as stated in the guidelines. Qualified applicants will be admitted based on building, grade level and program capacity. The Superintendent's Office will notify you, in writing, of approval or denial of this request between July 15th and August 15th. Falsifying any information will result in denial or revocation of Open Enrollment.

NOTE: In order for this application to be considered for approval, it must be received in the Heath City School District Office at 107 Lancaster Drive, Heath, Ohio 43056 by the DEADLINE indicated on page one of this application.

Signature of Heath City Schools Superintendent: _____ Date: _____

Application is: _____ approved _____ denied