

**HEATH CITY SCHOOLS  
INTER-DISTRICT OPEN ENROLLMENT  
APPLICATION 2019-2020 School Year**

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

\_\_\_\_\_ NEW APPLICATION  
(Deadline is May 31, 2019)

\_\_\_\_\_ RENEWAL APPLICATION  
(Deadline is May 10, 2019)

Today's Date: \_\_\_\_\_

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

2. Grade Level for 2019-2020 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: \_\_\_\_\_

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 to students, outside of the district, 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 15<sup>th</sup> and August 15<sup>th</sup>. 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