

INTER-DISTRICT OPEN ENROLLMENT APPLICATION

New Riegel Local Schools

Date of Application \_\_\_\_\_ Student's SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade Level for Upcoming School Year \_\_\_\_\_

District of Residence \_\_\_\_\_ Current School Attended \_\_\_\_\_

Was student expelled or suspended at anytime during the last school year?      Yes      No

If yes, how many days? \_\_\_\_\_

Is student enrolled in any special education or tutorial programs?      Yes      No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Names of parent(s) legal guardian \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

To maintain continuity of programs, inter-district open enrollment students must remain in the New Riegel Local School District for the entire year. Applications for inter-district open enrollment transfers are approved for only ONE YEAR and must be received by the Office of the New Riegel Superintendent beginning the first Monday in May through May 31<sup>st</sup> of the calendar year.

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

Date Received \_\_\_\_\_ Time Received \_\_\_\_\_

**PARENT NOTIFICATION:**

Date: \_\_\_\_\_ Time \_\_\_\_\_

Approved: \_\_\_\_\_ Rejected: \_\_\_\_\_

Reason for Rejection \_\_\_\_\_