

**ALEXANDER CITY SCHOOLS**  
**APPLICATION FOR NON-RESIDENT STUDENT ENROLLMENT**  
 (Must be completed and submitted by Parent/Legal Guardian at Alexander City Board of Education)

Application Date: \_\_\_\_\_

STUDENT'S NAME: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GRADE as of Application Date: \_\_\_\_\_

Requested Date for Enrollment: \_\_\_\_\_ Expected Grade, if accepted: \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

CHILD LIVES WITH: PARENTS \_\_\_\_\_ MOTHER \_\_\_\_\_ FATHER \_\_\_\_\_ GUARDIAN \_\_\_\_\_

Name and Address of Current/Former School: \_\_\_\_\_

Is the applicant a special education student? \_\_\_\_\_ If yes, student's current IEP must be submitted for review.  
 In the past year, has the student been suspended or expelled from school? \_\_\_\_\_

**PARENT(S)/GUARDIAN(S):** If guardian, provide copy of guardianship papers.

MOTHER/GUARDIAN \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_ EMPLOYER \_\_\_\_\_

FATHER/GUARDIAN \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_ EMPLOYER \_\_\_\_\_

Does the parent/guardian own property or a business in the school zone? \_\_\_\_\_

Is the parent/guardian an employee of the City of Alexander City? \_\_\_\_\_

List any siblings already enrolled in the Alexander City Schools. \_\_\_\_\_

**REQUIRED DOCUMENTATION – Must be received prior to being considered for enrollment. Check all submitted.**

- Copy of parent/legal guardian's Driver's License or State Issued ID – REQUIRED FOR ALL STUDENTS
- Disciplinary Record for the past calendar year (365 days) – REQUIRED FOR ALL STUDENTS
- Attendance Record for the past calendar year (365 days) – REQUIRED FOR ALL STUDENTS
- Grade Report for the past calendar year (365 days) – REQUIRED FOR ALL STUDENTS
- Special Education Individualized Education Plan (IEP) – IF APPLICABLE
- Documentation of property owned within school zone – IF APPLICABLE
- Documentation of business owned within city limits of Alexander City – IF APPLICABLE
- Documentation of employment by the City of Alexander City – IF APPLICABLE
- Legal Guardianship Papers – IF APPLICABLE

PARENT SIGNATURE \_\_\_\_\_

*It is the policy of the Alexander City Board of Education that no person, on the grounds of race, color, handicap, sex, religion, creed, national origin, or age be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program, activity, or employment.*

**Office Use Only**

Date of Action: \_\_\_\_\_ Accepted \_\_\_\_\_ Denied \_\_\_\_\_

Notes: \_\_\_\_\_