

JFB-EA

EXHIBIT

**OPEN ENROLLMENT**

**APPLICATION**

The Student:

Resides within the District  Resides outside the District

Student's Name \_\_\_\_\_ Current Grade \_\_\_\_ DOB \_\_\_\_\_

Current School \_\_\_\_\_ District \_\_\_\_\_

Reason for seeking admission: \_\_\_\_\_

Parent Name \_\_\_\_\_  
Last First M.I.

Home address (physical address) \_\_\_\_\_

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

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Pager/Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Please answer the following questions regarding the above-named child:

1.  Yes  No Has the child been expelled from another school?
2.  Yes  No Is the child in the process of being expelled from another school?
3.  Yes  No  N/A Is the child in compliance with any conditions imposed by a juvenile court?

If you checked "Yes" for any of the above, please explain in detail: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has child participated in or will child need participation in any special school programs? If yes, please complete Exhibit JFB-EB, Special School Programs.

The parent/legal guardian signing this application affirms the following:

1. The parent/legal guardian has been provided with a copy of the Student Handbook and affirms that the child seeking enrollment will abide by the rules and regulations that govern students at the school in which the student seeks to enroll.

2. The parent/legal guardian has been provided a copy of the District's Open Enrollment Policy JFB and a copy of the District's Administrative Regulation JFB-R which contains the procedures for the Open Enrollment Program.

3. The parent/legal guardian understands that providing false information on this form or Exhibit JFB-EB may result in the application being denied or open enrollment admission being revoked.

\_\_\_\_\_  
Signature of Parent or Legal Guardian \_\_\_\_\_ Date  
=====

Date Open Enrollment Application received \_\_\_\_\_

Priority Group  A  B  C  NA

Approved  Not Approved  Waiting list number \_\_\_\_\_

If not approved, give reason:  
 Lack of capacity  Other: \_\_\_\_\_

Principal \_\_\_\_\_ Date: \_\_\_\_\_

A copy of this document should be placed in the student's school folder if the student is accepted or in the school's open enrollment files if the student is not accepted.