

**MOSCOW SCHOOL DISTRICT #281
OPEN ENROLLMENT APPLICATION FORM**

School Year Request: 20___/20___

New Application	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date:
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In-district Transfer Request	Yes <input type="checkbox"/>	Requested School:
Zoned School:	Current School:	

Out-of-district Transfer Request	Yes <input type="checkbox"/>	Requested School:
Resident School District:	Copy of Student's Grade Report must be attached for Out of District Applicants..	

Student Information

Last:	First:	Middle:
Date of Birth ___/___/___	Parent/Legal Guardian Name:	
Grade Entering:	Parent/Legal Guardian Email:	
Street Address	Cell/Home Phone	
City	Zip Code	Work Phone
Is your student on an IEP YES <input type="checkbox"/> NO <input type="checkbox"/>	Is your student on a 504 Plan? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Has your student had a history of attendance infractions within the past three years? (<i>less than 90% attendance during a semester.</i>) YES <input type="checkbox"/> NO <input type="checkbox"/>		
If YES, please explain:		
Has your student had a history of disciplinary infractions within the past three years? (<i>Two or more suspensions or expulsion</i>) YES <input type="checkbox"/> NO <input type="checkbox"/>		
If YES, please explain:		

Reason for Transfer Request

SPORTS (High School Only)

Will your student participate in IHSAA sanctioned activities? YES <input type="checkbox"/> NO <input type="checkbox"/>
If YES, which sports/activities:
If the student participates in any athletic program governed by IHSAA, the student may not be eligible to participate at the new high school. It is the responsibility of the parent/guardian to <u>check</u> the IHSAA website for participation rules before submitting this application.

Considerations:

- The transfer request for an out of district student is not complete until notification has been sent to the resident school district's superintendent. The student should remain enrolled in their resident school district until there is an effective start date at the requested school.
- The transfer request for a student residing in the Moscow School District should remain enrolled at their hard zone school until notified of acceptance to attend another school within the district.

- The District will notify parents of acceptance and the effective start date or denial.
- Transportation of open-enrolled students is the responsibility of the parent/guardian.

Decision-Making Criteria, Revocation, and Appeals:

Space Availability

All applications will be considered on a stringent space-available basis. In the event there is not space available in the grade level, class or program requested, other options will be provided if the request cannot be filled. In the event there are no spaces available, the student will be placed on a waiting list in order of the date of the request.

Attendance and Disciplinary Infractions

Open enrolled students from out of the district are expected to follow all discipline and attendance policies and regulations applicable to all Moscow School District students. Failure to meet these conditions may result in revocation of this open enrollment transfer and a return to the student’s resident school district.

Appeals

Appeals of denial or revocation of open enrollment for students residing within or outside of the Moscow School District boundary will be directed to the Board of Trustees except for denials based on space availability, in which case the Superintendent’s decision is final.

Acknowledgements:

- I certify that the information provided is accurate and complete.
- I understand that approval of this request shall be dependent upon the acceptance and rejection standards stated in the District’s policy, and revocation of this transfer may occur in accordance to the conditions listed in the District’s policy.
- I understand that my student must continue to attend the resident school until the effective start date of the transfer and that non-attendance is subject to truancy procedures.
- I understand that I am responsible for providing transportation to and from school for my student.
- I understand that requests are approved for one school year only, and it is my responsibility to complete an Intent to Return the following year.
- I understand when my student moves to the next school level (elementary to middle school, middle school to high school) a new Open Enrollment Application will be required.
- I understand that the transfer can be revoked at any time during the first two (2) years if there are attendance or discipline issues or if there is no longer space within the grade level, class or program.

By signing this application, I acknowledge that I have read the school district policies and procedures on Open Enrollment and hereby request that my student be permitted to attend the requested school.

Parent/Legal Guardian Signature _____ Date _____

Student Signature (6-12 only) _____ Date _____

For District Use Only	
Date Application Received:	By:
In-District Transfer Request: Approved <input type="checkbox"/> Denied <input type="checkbox"/>	
Reason for Denial:	
Out-of-District Transfer Request: Approved <input type="checkbox"/> Denied <input type="checkbox"/>	
Reason for Denial:	
Date of Parent Notification:	Notification Sent to Resident School District: YES <input type="checkbox"/> Date:
Superintendent Signature:	Date: