

2016-2017 Elementary (K-5) Open Enrollment Application



For your information:

- This form is not to be used for application to **Prescott Elementary School**, a district-sponsored Charter School. Application for admission is available at Prescott Elementary School, 1151 White Street, Dubuque IA 52001 (phone 563-552-4200).
- Please complete and mail/deliver completed application to: **Office of the Superintendent, 2300 Chaney Road, Dubuque IA 52001**
- Parents of students approved for open enrollment are responsible to **transport** student to the new school on-time daily.
- Elementary Open Enrollment Applications are accepted from **March 15, 2016 through 4:30 p.m. on May 2, 2016**. The district will target mailing written responses on June 1, 2016. All applications received after the May 2nd deadline will be filed for action after fall registration, with decisions communicated before the start of school.



Name of Parent / Guardian		Date of Application
Present Street Address	City	Zip
Name of Student	Date of Birth	Student's Grade for the 2016-2017 School Year
Y / N This student receives Special Education Services and has an IEP.		



Reason for Request: Use the back of this form to provide additional information. The following section must be completed, with explanation or documentation attached, in order to be considered. **Incomplete forms will be returned without consideration.**

- New to the Community** Student has not previously been enrolled in a Dubuque Community School District school.
- Continuation** Student was open enrolled to the requested school last year.
- Mid-year Continuation** Student attended the requested school prior to a mid-year move out of the school's boundary. Must provide:
Old address: _____ Move effective date: _____
- Dual Enrolled/Open Enrolled** Request to enroll student in the following classes/activities: _____
- Medical Reasons** Attach physician's statement specific to the requested school.
- Legal Reasons** Attach legal documentation specific to the requested school.
- Moving into Requested School Boundary** Attach documentation (purchase/rental agreement reflecting assumption date).
- Sibling from the Same Primary Home** previously approved for open enrollment and will be in attendance at the school during the 2016-2017 school year. Provide sibling's name and 2016-2017 grade level: _____
- Parent is Employee** assigned to the requested school full time during the 2016-2017 school year. Provide parent's name and position: _____
- Child Care** If the request is tied to day care, it will be verified. Further explain situation on the back of this form. Must provide info below:
Child care center, or private care address: _____ Center director: _____ Phone: _____
- Extenuating Circumstances** as defined by *Policy 1001 Anti-Harassment/Bullying* and/or *Policy 1005 Anti-Discrimination*. Attach copy of each Harassment, Bullying, and Discrimination Form previously filed at the student's current school.
- Other** Provide explanation on the back of this form.
- Prescott Enrollment**
 - Prescott is full at this grade level. I have placed my child on the wait list and will enroll at another school for now. (Space not available)
 - Prescott is full at this grade level. I wish for my child to be placed at another school.
 - Prescott is full at a sibling's grade level. I wish for my child to be placed at another school.



School currently attending: _____



Home School: _____
(School student should attend for 2016-2017 according to residence)



School requesting to attend:
(First Choice) _____
(Second Choice) _____



I have read and understand the attached Policy 6218 regarding In-District Open Enrollment. I will detach and keep Policy 6218 for my future reference.



REQUIRED: Signature of Parent / Guardian



REQUIRED: Day telephone number(s) for Parent / Guardian

For Office Use:
201__ - 201__: # Absences _____ # Tardies _____