



2016-2017 Secondary (6-12) Open Enrollment Application

Instructions: Please type or print – must be legible. Complete one form per student. Required documentation must accompany the application, or this form will be returned without consideration. Mail or deliver completed application to: **Office of the Superintendent, 2300 Chaney Road, Dubuque IA 52001**

Secondary Open Enrollment Applications are accepted from **January 15, 2016** through **4:30 p.m. on March 1, 2016**, with written response to be mailed to parent/guardian on or before **March 30, 2016**. **All applications received after the March 1st deadline will be filed for action after fall registration in August.**

Please note that for the 2016-2017 school year, secondary open enrollment requests will be severely restricted in an effort to maintain enrollment balance between the schools. **Parents of students approved for open enrollment are responsible for transporting their student to the new school.**

_____ <i>Name of Parent / Guardian</i>		_____ <i>Date of Application</i>
_____ <i>Street Address (In case of a move, NEW Street Address)</i>	_____ <i>In case of a move, OLD Street Address</i>	_____ <i>(Move Effective Date)</i>
_____ <i>New Zip Code</i>	_____ <i>Zip Code</i>	Check here if student is entitled to Special Education Services <input type="checkbox"/>
_____ <i>Name of Student</i>		_____ <i>Grade during the 2016-2017 school year</i>

Reason for Request: (Reason **MUST** be completed with an explanation and/or the proper documentation to be considered. **Incomplete applications will be returned without consideration.**)

- New to community
- Dual Enrolled

- Medical Reasons. Must attach physician's statement specific to the building requested or form will be returned.**
- Legal Reasons. Must attach police or court order or form will be returned.**
- Request for continuation following move out of requested school boundary. Must provide move date: _____**
- Imminent and documented change of address for the family which results in the family moving into the requested school boundary. Must attach documentation (purchase/rental agreement) or form will be returned.**
- Sibling from the same primary home in attendance at the building during the 2016-2017 school year. Must provide sibling's name and grade level: _____**
- Parent assigned full time to the same school building during the 2016-2017 school year. Must provide parent's name and position: _____**
- Extenuating circumstances which would create a hardship significantly affecting the learning progress of the student for whom open enrollment is requested. Must explain on the back of this form or form will be returned. →**
- Extenuating circumstances – as defined by Policy 1001 Anti-Harassment/Bullying and/or Policy 1005 Anti-Discrimination. Must attach copy of the HBD form(s) previously filed at the student's current school. If forms are not attached, this application will be returned.**

School student is currently attending: _____

Home School: (School student should now attend according to residence.) <input type="checkbox"/> Jefferson Middle School <input type="checkbox"/> Senior High School <input type="checkbox"/> Roosevelt Middle School <input type="checkbox"/> Hempstead High School <input type="checkbox"/> Washington Middle School	School requesting to attend: (One school per application.) <input type="checkbox"/> Jefferson Middle School <input type="checkbox"/> Senior High School <input type="checkbox"/> Washington Middle School <input type="checkbox"/> Hempstead High School <input checked="" type="checkbox"/> Roosevelt Middle School (closed to OE for 2016-2017)
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→ I HAVE READ AND UNDERSTAND THE ATTACHED POLICY 6218 regarding In-District Open Enrollment.
 I understand I am to detach and keep Policy 6218 for my future reference. Mail or deliver this form to: **Office of the Superintendent, 2300 Chaney Road, Dubuque IA 52001**

_____ - _____: # of absences _____, # of tardies _____

This space is for office use, only.

REQUIRED: Signature of Parent / Guardian

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