



2017-2018 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 16, 2017** through **4:30 p.m. on March 1, 2017**, with written response to be mailed to parent/guardian on or before **March 31, 2017**. **All applications received after the March 1st deadline will be filed for action after fall registration in August.**

Please note that for the 2017-2018 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.**

_____ Name of Parent / Guardian		_____ Date of Application
_____ Street Address (Current or NEW Street Address)	_____ In case of a move, OLD Street Address	_____ (Move Effective Date)
_____ (Current or New) Zip Code	_____ Zip Code	Check here if student is entitled to Special Education Services <input type="checkbox"/>
_____ Name of Student		_____ Grade during the 2017-2018 school year



PLEASE NOTE: Open enrollment is a privilege and may be rescinded based on student behavior, attendance or lack of academic performance.

- New to community
- Dual Enrolled

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.)

- 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 2017-2018 school year.** Must provide sibling's name and grade level: _____
- Parent assigned full time to the same school building during the 2017-2018 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.)	School requesting to attend: (One school per application.)
<input type="radio"/> Jefferson Middle School	<input type="radio"/> Senior High School
<input type="radio"/> Roosevelt Middle School	<input type="radio"/> Washington Middle School
<input type="radio"/> Washington Middle School	<input type="radio"/> Hempstead High School
	<input checked="" type="radio"/> Roosevelt Middle School (closed to OE for 2017-2018)



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
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This space is for office use, only.

REQUIRED: Signature of Parent / Guardian

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