

OPEN ENROLLMENT

ATTENDANCE APPLICATION

File this application at the School District office

Student's name _____
Last First M.I.

Current grade _____ Birth date _____ Home phone _____

Work phone _____ Message phone _____

Parent's name _____
Last First M.I.

Home address _____
Street City Zip

E-mail address _____

The above-named student: resides outside the School District; or
 resides within the School District

Present school of attendance

School _____ District _____

City _____ County _____

Request assignment to _____ School

Is the above-named student:

Yes No Expelled or long-term suspended from any school or school district?

Yes No Currently subject to expulsion or long-term suspension from a school or school district?

Yes No N/A In compliance with conditions imposed by a juvenile court?

Yes No N/A In compliance with a condition of disciplinary action in any school or school district?

Note: The following conditions apply to the open-enrollment program:

OPEN ENROLLMENT CONTRACT
San Simon Unified School District #18
_____ School Year

This contract is for _____ to enroll as an open enrollment student. My child currently lives out of this school's attendance boundaries and currently attends _____.

For this student to remain enrolled under open enrollment in this school, he/she agrees to:

1. Abide by the rules, standards, and policies of the school and the district
2. Guarantee his/her attendance on a regular basis (No more than 7 days absent per semester)
3. All Grades must be at passing levels
4. Not receive any discipline
5. Be respectful to all staff

Students who do not abide by these rules may be immediately withdrawn from our school following policy JFB.

Please note, this contract must be re-submitted with a *new open enrollment application each year.*

Please remember that transportation is **not** provided by the district to open enrollment students outside of our regular established routes.

For this student to remain enrolled under open enrollment in this school, he/she agrees to the expectations set forth by SSUSD:

STUDENT SIGNATURE _____ DATE _____

PARENT SIGNATURE _____ DATE _____

SUPERINTENDENT SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY: _____

1st Student Conference Date _____ Time _____ Parent Notified _____ Notes attached _____

2nd Student Conference Date _____ Time _____ Parent Notified _____ Notes Attached _____

Revocation Conference: Date _____ Time _____ Parent Present _____ Notes and letter attached _____