

**LOGAN ELM LOCAL SCHOOLS
OPEN ENROLLMENT APPLICATION**

Open Enrollment School Year: _____ Application Date: _____

Grade Level at Open Enrollment: _____ Open Enrollment Student Last Year? Yes ___ No ___

Student's Name: _____

Student's Date of Birth: _____ Student's Social Security Number: _____

Parent(s)/Legal Guardian: _____

Address: _____

Telephone (Home): _____ Telephone (Work/Other): _____

In what school district do you reside? _____

What school does your child currently/previously attend? _____

What is your child's present/previous grade level? _____

If grade level request is 9-12, list the high school courses requested (open enrollment transfer acceptance does NOT guarantee that every course requested will be available):

Has the student been suspended or expelled from school for ten or more days the previous school year?

Yes ___ No ___

- Misinformation on this application will void consideration
- A separate application must be submitted for each student
- Complete the back side of this form, confirming residence

I have read, reviewed and accept Logan Elm Local School District
Open Enrollment Policies and guidelines.

Parent/Guardian Signature

Date

For Office Use Only

Received by: _____ Date: _____

Circle one: Approved Denied/Reason: _____

Signature of School official: _____ Date: _____

*No student shall be denied admission to Logan Elm Local School District or to a particular course or instructional program or otherwise discriminated against for reasons of race, color, national origin, sex, handicap or any other unlawful discrimination.

LOGAN ELM LOCAL SCHOOLS

9579 Tarlton Road

Circleville, Ohio 43113

RESIDENCE VERIFICATION FORM

I, _____, certify that I am a resident of the
_____ School District at

Address _____

City/Zip Code _____

Date of Occupancy _____

*Verification of above residence provided by copy of one of the following items:

_____ Signed Rental Agreement

_____ Mortgage Coupon

_____ Rent receipt with current address

_____ Property tax statement

_____ Utility Bill

_____ other

_____ Special circumstances (Letter describing circumstance). Applicant

must have a notarized letter from the owner you are residing with.

Upon return, resident will be verified by district truant officer.

I, _____, further certify that the above information is true and accurate. Should any of this information be false, I understand that immediate withdrawal will occur. I am aware that the Logan Elm Local School District may use legal means to verify my residence.

<u>Child(ren)</u>	<u>Birthdate</u>	<u>Grade</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of Parent/Guardian

Relationship to Child

Date: _____