SCHOOLS OF CHOICE APPLICATION FOR PARTICIPATION

Return completed form to the superintendent's office of the district where the applicant desires to attend.

Notification will be made by the school district to the parent/guardian.

Confirmation of attendance by parent/guardian must be made to guarantee placement.

APPLICANT INFORMATION:			
Application Date:	Student Name:		
Student Grade (entering):	Student Birth Date:		
District of Residence:	Last School Attended:		
District Requested to Attend:	Building Requested to Atte	nd:	
Please check: Male Female	Please check (Optional):	Caucasian Hispanic Asian	Native American
PARENT INFORMATION:			
Name:	Address:		
Telephone #:	City/Zip:		
Were there other siblings or household n previous school year?	nembers in attendance in the school d	istrict to which you Yes	
If yes, please list by name:			
This section must be completed by a	n official of the last school attended in ord	ler to be considered	for Schools of Choice.
Has the applicant been expelled or suspend	ed from school within the last two (2) year	rs? Yes	No
If yes, for what reason(s)?			
Does the applicant require Special Education	n Services?	Yes	No
If yes, please identify the program required			
Signature/Title of Current School Official pr	roviding this information:		
Records, including discipline and attendance, records/information to be release?		ool. Do you give per	mission for the applicant's
•	oility of the applicant/parent/guardian ciation regulations apply to all transfers in	volving high school a	ge students.
Parent Signature:			
Approved	Not Approved	Waiting L	ist
Authorized School Signature			 Date
Authorized school signature		Date	

Applicants for admission as non-resident students and their parents/guardians are hereby notified that the Jackson County Schools do not discriminate on the basis of race, color, national origin, sex, religion, or disability in admission or access to programs, activities, or policies. Any person having inquiries concerning the district's compliance with the regulations implementing Title VI, Title IX, or Section 504 of the Rehabilitation Act, is directed to contact the district superintendent who will refer you to the individual designated by the school district to coordinate efforts to comply with the regulations implementing the above status.