

Englewood Schools Open Enrollment Application and Agreement

Student's Name:	Date of Birth:	Grade:
Home Address:		
Parent Name:	Contact Number:	
Requested School:	School Year:	
Last School Attended:	School District in which your residenc	e is located:
Yes No This student has been expelled/dia Yes No This student has a sibling attendir Yes No This student has a sibling attendir Yes No. This student has a parent/guardia	ng this school. Ing a different Englewood School. In currently employed with Englewood Schools.	
Staff Member:	Location:	

If this application is approved, I understand and agree to abide by the following: (please initial)

_____ I understand and acknowledge that enrollment is conditional until the district has received records from the previous school. In the event that the student's records indicate a reason to deny admission, the student's conditional enrollment status shall be revoked. (Board Policy JF) _____ I will assume ALL responsibility for transportation.

_____ I acknowledge that if this application is approved, it is for the above-named student only and does not include approval for siblings.

_____ I understand that my student must be approved for open enrollment and once accepted every effort will be made to permit the student to complete the highest grade in that building as outlined in Board Policy JFBA-R/JFBB-R.

_____ I understand that athletic eligibility is determined by school policy and Colorado High School Activities Association (CHSAA). Additional information is available at www.chsaa.org

_____ I understand that I will need to apply for open enrollment and complete this form for each school level my child moves to (ECE to Elementary, Elem to Middle and Middle to High School) and enrollment will be conditional on that school's space and availability.

PARENT/GUARDIAN SIGNATURE

DATE

In the event any information is falsified or withheld from the district during the admission process, approval for admission will be withdrawn immediately. (Board Regulation JFBB-R)

OFFICE USE ONLY			
Date Received:	_ Priority Level: 1 2 3 4 5 6	Notes:	
	Approved		
Receiving Principal's Signature	Denied		
	Wait List		

Revised 08/2022