

OPEN ENROLLMENT/NON-RESIDENT APPLICATION

St Vrain Valley School District RE-1J

Please refer to JFBA and JFBA-R prior to filling out this form.

Transportation for open enrollment/non-resident students is the responsibility of the parent/guardian.

Please print legibly in ink, one application per student

STUDENT INFORMATION

Student's Name _____ Birthdate _____ Student ID # _____

Parent's Name _____ Parent's Phone # _____

Address _____ City, Zip _____

Parent's Email Address _____

Do you live in St Vrain Valley School District? Y N If not, what school district? _____

If yes, in what school attendance area do you reside? _____
(See <http://svvsd.org/maps> if unknown)

Is student eligible for special education services? Y N If so, what services? _____

Does student have a 504 Plan? Y N School records are at (school and/or district): _____

DESIRED SCHOOL INFORMATION

Requested School ERIE HIGH SCHOOL For School Year 2018 - 2019

What grade will your child be in? _____ If Kindergarten, choose (circle) Full or Part Time

Will a currently open enrolled sibling be attending during the same school year? Y N Name/Grade _____

Parent Signature _____ Date _____

For school use only – do not write below line

Date Rec'd _____

Approved Denied Reason for denial _____

Receiving Principal _____ Date _____

Applications (front and back) should be submitted to the EHS Registrar, Mrs. Tapia, during the Open Enrollment period that begins December 1, 2017 and ends January 16, 2018.

December 1st - Applications will **only be received in person** in the EHS front office

Email: TAPIA_LETICIA@SVVSD.ORG Fax (720) 494-3873



SAFE SCHOOLS LEGISLATION REGISTRATION ADDENDUM

NOTIFICATION OF 48-HOUR REGISTRATION HOLD

Your student's registration as a student in the St. Vrain Valley School District may be held up to 48 hours (two working days). State law, C.R.S. 22-33-106(3)(c and f), provides the school in which he/she wishes to enroll the ability to deny admission if the student has:

- a) been expelled from any school district during the preceding 12 months; and/or,
b) engaged in behavior in another school district during the preceding 12 months that is detrimental to the welfare or safety of other pupils or school personnel.

PURPOSE

During the 48-hour hold, the receiving St. Vrain Valley School will contact the school(s) your student attended during the past 12 months to verify that neither of the conditions described above exists. Additionally, previous school personnel may be able to alert the receiving school to ways in which we may best serve your student.

It is not the intent of the receiving school or the district to cast doubt upon the ability of your student to perform academically or behaviorally as a pupil in the receiving school. This process assists the receiving school in remaining within parameters described in district policy and state law. Further, it reduces the probability of inappropriate speculation as to the nature of the student's disciplinary record at their previous school.

DECLARATION

AS THE PARENT/GUARDIAN OF THE ENROLLING STUDENT, YOU ARE REQUESTED TO DECLARE THE STUDENT'S STATUS AT HIS/HER PREVIOUS SCHOOL. PLEASE CHECK ALL THAT APPLY.

Legal Last Name: _____ Legal First Name: _____ Legal Middle Name: _____

Date of Birth: _____ Grade: _____

- checkbox This student has not been expelled from any school district during the preceding 12 months.
checkbox This student had no significant disciplinary problems (multiple suspensions or serious infractions of school policy/rules at his/her previous school.

Name of Previous School: _____

Address of School: _____

Phone Number: _____ Name of Person to Contact: _____

SIGNATURES:

I have read and understand the above. I verify that the information provided is true to the best of my knowledge. I have provided enrolling school with a full disclosure of all information outlined above.

Parent/Guardian Signature

Student Signature

Date

FOR USE BY ENROLLING SCHOOL ONLY

School Contacted on _____ by _____

Name of Person Contacted _____ Title _____

Information Provided Above is Correct checkbox Yes checkbox No

Comments _____

Principal/Administrator Signature

Date