



APPLICATION FOR IN-DISTRICT SCHOOL OF CHOICE Taylor School District 2023-2024

PLEASE PRINT

Students must be registered in the Taylor School District to apply

STUDENT NAME: _____

BIRTHDATE: _____

HOME ADDRESS: _____

Yes___No___ Is this address on file at Pupil Accounting?

Yes___No___ In the last 2 years has this student been **Suspended or Expelled?**

Yes___No___ **Is your child receiving Special Education Services?**

Program: _____

CONTACT INFORMATION: Parent/Guardian Name _____

Phone(s)_____

Email_____

REASON FOR REQUEST _____

| |
|--|
| REQUESTED SCHOOL: _____ GRADE: _____ |
|--|

ATTENDANCE AREA - (BOUNDARY HOME SCHOOL) _____

SCHOOL CURRENTLY ATTENDING (IF NOT SAME AS HOME SCHOOL)_____

For office use only:

This request has been _____accepted_____denied_____

Director of Pupil Accounting & Student Services

Date

This request has been _____accepted_____denied_____



APPLICATION FOR IN-DISTRICT SCHOOL OF CHOICE

Taylor School District 2023-2024

Director of Special Education

Date

Does a sibling of this student or another student at this same address currently attend the requested school? Yes_____ No_____ If yes, please fill out below.

Name of Student:

Current Grade:

NOTE: Priority will be given in an effort to keep siblings together when possible. If more applications are received than spots available, a random lottery will be conducted.

As A Parent or Guardian:

I will be cooperative and supportive of school personnel and procedures. I full realize that I am responsible for my child's attendance and punctual transportation to and from school at all times. If my child's attendance or behavior is inappropriate my child will be returned to his/her home school. I affirm that, as the parent/guardian, all information provided above is true and accurate. I understand any false information provided by me may subject my child to disqualification. I hereby give my permission for the release of student records by present school, including discipline information if necessary.

PARENT/GUARDIAN SIGNATURE

DATE

**TRANSPORTATION TO AND FROM THE "CHOICE"
SCHOOL IS THE RESPONSIBILITY OF THE
PARENT**