## Ridgedale Local Schools Interdistrict Open Enrollment Application

Student's N	lame:	(Last)	(First)	(Mide	dle)	
Date of birtl	h:	. ,	,	(	,	
School dist	rict of residence:					
School dist	rict currently attendir	ng:				
Grade level	for <u><b>2023-2024</b></u> scho	ol year (circle one	): K – 1 – 2 – 3 – 4 – 5 -	-6-7-8-9-1	0 – 11 – 12	
Is this stude	ent enrolled in any sp	pecial programs?	Individualized Education	Plan (IEP), Gifted	d, or Accelerated	
If yes, pleas	se indicate which spe	ecial program or s	ervices student is receivi	ng:		
Has this stu	udent been suspende	ed or expelled for t	en (10) consecutive day	s in the current or	preceding term?	
	Yes	No				
open enroll be using.			he six open enrollment b our transportation depar			
Are other st	tudents from your im	mediate family op	en enrolled at Ridgedale	? Yes	No	
Name(s) of	other student(s):			Grade lev	/el(s):	
Residentia	I Parent/Guardian's					
Street addr	ess:					
City:			State:		Zip:	
Phone:	Home number	·		Cell Phone		
	Work number					
open enroll necessary.	ment privileges. Fur	ther, I hereby grar hat I am responsib	ification of the above info t permission for my chilo le for my child's transpo	d's educational red	cords to be reviewed, if	
Parent/Guardian's signature:				Date:		

## FOR OFFICE USE ONLY

Received by:		Date:	Time:	
Accepted	Rejected	Signature		
Reasons for rejection:				
Date notification sent to pa	arent(s):			
Date notification sent to be	uilding secretary			