## CARROLLTON EXEMPTED VILLAGE SCHOOL DISTRICT 205 SCIO RD S.W., CARROLLTON, OHIO 44615

**APPLICATION FOR OPEN ENROLLMENT 2023-2024** 

## APPLICATIONS FOR OPEN ENROLLMENT MUST BE RECEIVED BY THE Building Principal by May 10, 2023

(with the requested information below)

For additional information, contact the Superintendent's Office; 330-627-2181, email: karen.weber@carrolltonschools.org

An APPLICATION is required for each child. Complete and return to the building principal BY May 10, 2023

Student's Name Please print all information FIRST/MIDDLE/LAST		der: Female□ Male□ Birthdate	_//	
Name of Parent(s)/Guardian(s) Mr.□ M				
No□ Yes□ Is this child a foster placement? If y No□ Yes□ Is custody involved? If yes, provide			nents.	
			Zip Code	
Physical Address  Must attach proof of residency w/parent/guar	dian name on	: (i.e.) utility bill, renter's receipt, property t	ax receipt, etc.	
Mailing Address (if different)		County of Residence(Refer to your property tax record)		
<b>Primary Phone?</b> Home□ Cell□ Phone (	)			
Name of <u>Resident</u> School & District(School District where your child is to <u>attend</u> ac Grade Requested for 2023-2024: K 1 1	cording to you	Presen ur tax record) 4□ 5□ 6□ 7□ 8□ 9□ 10□ 1	t Grade Level	
No□ Yes□ Does your child receive any S (i.e.) LD□ Autism□ Other□	•	ation or related Services? If so, include	copy of IEP and explain.	
Other Programs: Buckeye Career Center	·□ College C	redit Plus $\square$ Gifted $\square$ Other $\square$		
No□ Yes□ Has student been expelled or	· suspended	from school? If yes, include suspension/ex	xpulsion notices(s)/records.	
Name & Grade of other child(ren)in the household re	questing Open I	Enrollment for 2022-2023 (even though an applica	ation is required for each child)	
STUDENT'S AGREEING TO ATTEND CAR ATTENDANCE POLICIES AND PROCEDU acceptance or denial or/around May 26, 2023	RES OR FO			
VParent/Guardian Signature		Date		
Open enrollment decisions are based on accurate information provided could disqualify the applicant. No student shall instructional program or otherwise discriminated against	mation provided I be denied admi	ssion to the Carrollton Exempted Village School Distr	ict or to a particular course or	
For Office Use Only:				
□APPROVED	Date RECEIVED by District			
□NOT <b>APPROVED</b>				
Reason for non-approval:  □ Building enrollment exceeds established □ Program enrollment exceeds established □ Student has been expelled for ten (ten) of □ Request received after Open Enrollment	capacity or more conse		s are on a waiting list made	
Signature of School Principal:	Date	Parent Phone Notification/Initial:	Date:	
Parent Letter Sent/Initial:	Date	Copy to EMIS/Leslie Lucas/Initial:	Date:	
NOTES:				
Superintendent Signature				