



Somerton School District No.11

“Children, Our Priority-Personal Best, Our Goal”

343 N. Carlisle Avenue • P.O. Box 3200 • Somerton, AZ. 85350-3200

Phone (928) 341-6000 • Fax (928) 341-6090

www.ssd11.org

Open Enrollment Information Packet

By May 1 of each year submit the Open Enrollment Attendance Application, (*exhibit JFB-E*) to be considered for enrollment during the following school year to the receptionist at the District Office. She will date and time stamp applications as they are received.

Standards for Acceptance, Rejection, or Wait List

District resident pupils assigned school attendance areas, children of persons who are employed by the district and resident transfer pupils and their siblings who were enrolled in the school the previous year are exempt from the open enrollment policy application requirements. (In other words, employee’s children, current students that were approved to attend your school and their siblings do not have to fill out an application every year.)

First time resident transfer pupils and nonresident pupils are subject to the Open Enrollment policies.

The Governing Board has determined that there is excess capacity to enroll additional pupils when there are less than 25 in any class K through 8th grade at any of the 7 Somerton School District schools. Pupils shall be selected based on designated priority categories from the pool of pupils:

Who have properly completed and submitted applications; and

Who meet admission standards?

After May 1, all applicants will be accepted if there is sufficient capacity. If there is insufficient capacity to receive all applicants for any one grade, at any one school, applicants will be selected in the order the applications were date and time stamped and resident transfer students will be accepted before nonresident pupils. Applications not selected will remain in priority order on a waiting list to be considered if enrollment numbers change before the start of school.

If applicants were not placed before the start of school due to enrollment numbers, applications will be revisited after the first 10 days of school as enrollment normalizes at each school site.

Waitlisted applicants will be reviewed regularly to check availability.

Enrollment Application Form Policy JFB

Administration: *Laura Noel, Ed.D, Superintendent*

Kim Seh, Asst. Superintendent

Governing Board: *Juan Castillo, President • Lorena Delgadillo, Clerk • Cristina Clark • Luisa Arreola • Laura Torres*



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EXHIBIT JFB-E OPEN ENROLLMENT

ATTENDANCE APPLICATION

FILE THIS APPLICATION AT THE SCHOOL DISTRICT OFFICE

Student's name _____ Last First M.I.

Current grade _____ or Requested grade _____ School Year _____ Birth date _____

Home phone _____ Work phone _____ Message phone _____

Parent's name _____ Last First M.I.

Home address _____ Street City Zip

E-mail address _____

The above-named student: Resides outside the School District; or Resides within the School District

Present school of attendance

School _____ District _____

City _____ County _____

Request assignment to _____ School

Is the above-named student:

Yes No Expelled or long-term suspended from any school or school district?

Yes No Currently subject to expulsion or long-term suspension from a school or school district?

Yes No N/A In compliance with conditions imposed by a juvenile court?

Yes No N/A In compliance with a condition of disciplinary action in any school or school district?

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File this application at the School District office

Other siblings who attend or will attending school:

Student's name: _____ Grade ____ School _____

Student's name: _____ Grade ____ School _____

Special Programs

Please identify any special programs your child has participated in or special help received from previous school personnel and any anticipated special school programs or services.

My child has participated in or it is anticipated will need to participate in the program(s) or services listed below:

- Gifted/Talented Special Education

Please check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Adaptive Physical Education | <input type="checkbox"/> Resource |
| <input type="checkbox"/> Physical Therapy | <input type="checkbox"/> Occupational Therapy |
| <input type="checkbox"/> Vision | <input type="checkbox"/> Assistive Technology |
| <input type="checkbox"/> Speech/Language Therapy | <input type="checkbox"/> Hearing |
| <input type="checkbox"/> Special Education Preschool | <input type="checkbox"/> Health Concerns- please explain |
| <input type="checkbox"/> Transportation as "related service" | <input type="checkbox"/> Special Class (self-contained) |

Section 504 (need current Accommodation Plan)

Other (explain)

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Note: The following conditions apply to the open-enrollment program:

1. An attendance application must be completed and submitted on or before May 1.
2. Enrollment is subject to the capacity limit established for the school and/or its grade levels.
3. On or before July 1, the parent or legal guardian will be notified in writing whether the application has been accepted, rejected or placed on a waiting list.
4. Transportation for the student is the responsibility of the parent or legal guardian.
5. Providing false information on this form may result in the application being denied or admission being revoked.

The signatory affirms that the student will abide by the rules, standards, attendance requirements, and policies of the school and the District.

Signature of Parent or Legal Guardian

Date

FOR DISTRICT USE ONLY * DO NOT WRITE BELOW THIS LINE

Student number _____ Date stamp _____

Filing Date

Accepted Placed on waiting list Asst. Superintendent _____ Date _____

Rejected - Reason for rejection _____

Copies sent by school to applicant and Superintendent's office.

Date sent _____

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