



OPEN ENROLLMENT APPLICATION
Date of Application (received in office)

<input type="checkbox"/> Early Enrollment (submitted between November 15 and the first Friday in February in order to transfer the following school year) <input type="checkbox"/> Year Requested, 20_____	<input type="checkbox"/> Late Enrollment (submitted outside the Early Enrollment Period) Please check one and indicate the year requested: <input type="checkbox"/> Current Year, 20_____ <input type="checkbox"/> Next Year, 20_____
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Student Name_____ Current Grade_____ Requested Grade_____

Date of Birth_____ Parent Name_____

Email_____ Phone _____

Physical Address_____

Mailing (if different) _____

Boundary School_____ Requested School_____

Current School_____ Reason for request_____

Is this student receiving or have they ever received any of the following services? ☐yes ☐no If yes, please indicate below:

☐Special Education ☐504 Accommodations ☐Speech ☐Alternative Language Services ☐Other/Medical (please specify)

A student may be denied an open enrollment opportunity if the student has been suspended or expelled from a public school consistent with 53A-2-208(3)(b).

Has the student ever been suspended or expelled from a public school? ☐Yes ☐No If yes, please explain:

Provisional Enrollment: ☐Approved ☐Denied ☐Approved per attached agreement

Signature of Principal or District Administration_____ Date_____

Standard Open Enrollment: ☐Approved ☐Denied

Signature of School Principal: _____ Date: _____

Submit application to: email:dmcmillan@ssummit.org

Fax: (435) 783-4501

Phone: (435)783-4301

South Summit School District | 285 E. 400 S. | Kamas, UT 84036 | Rev. 06/07/2021

Open Enrollment Terms of Contract

I understand that this application does NOT guarantee admission to any of the schools I have requested.

I understand that if a permit is granted, this form does NOT register my child for school. Registration is a separate process that must be completed after the permit takes effect.

I understand that all transfer requests are contingent on early enrollment school capacity (maximum capacity) or late enrollment school capacity (adjusted capacity), special program limitations, staff availability, and/or circumstances under 53A-2-207(4)(c). If this request is granted, I agree to leave my child at the requested school through the end of the requested school year.

I understand that a request may be denied in cases where the student has a history of excessive behavior problems, been suspended or expelled, or where the school/grade level has been declared closed to out of area requests.

I understand that an enrolled nonresident student shall be permitted to remain enrolled, subject to the same rules and standards as resident students without renewed applications in subsequent years, unless any of the following occurs:

- The student graduates; is no longer a Utah resident;
- The student moves to another school within the district;
- The student is suspended or expelled from school.
- The district determines that enrollment will exceed the open enrollment threshold.

I understand that I, as a parent or guardian, am responsible for transportation of my student to and from school.

I understand that my student may not be eligible to participate in Utah High School Activities Association (UHSAA) activities based on the UHSAA school transfer rules and policies. For more information please contact UHSAA.

I understand that by submitting this application, I am certifying that all information submitted is correct and complete. Falsification of information on this form will result in cancellation of out of area transfer.

By signing below, I agree to the terms and conditions of this contract.

Parent Signature

Date

