

EMERGENCY OPEN ENROLLMENT APPLICATION

This application for attendance in an alternative school is good for the 2008-2009 school year only.

Date of Application _____

Student Name _____ Phone # _____

Address _____
(street, p.o. box, city, state, zip)

Parent/Guardian Name(s) _____

Address _____
(street, p.o. box, city, state, zip)

Email Address _____

School Requested _____

Home School (circle one): Arrowood Cox McKinley Shawnee Simon Kenton Spring Hill Tecumseh Central MS Warner MS

School Student is Currently Attending _____ Grade _____

School Attended Last Semester or Last Year _____ Grade _____

Is your child a Special Education Student? Yes ___ No ___ Does your child have an IEP? Yes ___ No ___

REASON(S) FOR REQUESTING ATTENDANCE IN ALTERNATIVE SCHOOL: _____

Parent/Guardian Signature

NOTE: Attendance in an alternative school will be granted only in cases where extreme circumstances exist. Once approved, the student *must remain at the assigned school for the remainder of the school year.* Please consider carefully your application before submission to:

Gretchen Rives, Open Enrollment Coordinator
Xenia Community Schools
578 East Market Street
Xenia, Ohio 45385
(937) 562-9014 or (937) 562-9010
Fax: (937) 372-4701

(For office use only)

DISPOSITION: _____

DATE: _____