

PARENT/GUARDIAN AGREEMENT
TO AN INTER-DISTRICT OPEN ENROLLMENT

We have been properly informed that our child is to be enrolled in a school we have selected in an open enrollment district and agree to the following conditions:

- A. Our/my child may not be admitted or may need to be transferred back to his/her home school at the end of the semester or the school year, if the maximum number of enrollments in the classroom or program he/she is attending become filled by students of that school district or by tuition students.
- B. If our/my child should require special education services or a reasonable accommodation for a Section 504 disability, he/she may be transferred back to a school in their home district or to a school in that district that currently provides such services or can make the accommodation, if the school he/she is attending is not providing the services or cannot make the reasonable accommodation.
- C. We/I shall provide the transportation for our child either to the school he/she will be attending or to a school bus stop within that school district if transportation is available. Transportation is not available for high school students.
- D. We/I understand that the enrollment is only for the current school year, and we must make the application again next year.

Student Name

Date of Birth

Student's Home Address

Telephone Number

Parent Name

Date

Parent Signature

Date

Parent's Home Address

Telephone Number

Student Signature

Date