

Student ID#: _____

Date Received _____

If new to the district, you must go to the Elyria Schools Website and complete the online registration.

If new to the district and applying for Elyria High School, you must attach copies of this year's transcripts (including EOY and OAT test scores) and attendance records.

If already in the district and you have moved, you must also complete the change of address forms and provide: 2 proofs of residency in order for this application to be considered.

ELYRIA CITY SCHOOLS

Pupil Services Department
42101 Griswold Road
Elyria, Ohio 44035
(440) 284-8246

OPEN ENROLLMENT APPLICATION FOR SCHOOL YEAR: _____

Please print. List only one child per application form. This application is not valid unless it is signed. Please return this application no later than the last Friday in April. You will receive a letter indicating whether or not your request has been approved. Approval of this application is dependent primarily upon building, program and classroom capacity.

Child's name: _____ Grade : _____ Date of Birth: _____

Home address: _____ City: _____ Zip Code: _____

Phone: _____ Sex: M F

Race White Black B/W Hispanic Asian Other _____

School requested: _____

Your home school/district _____

Does this child or a sibling already attend this school? No Yes

If yes, names of sibling(s) _____

Check box if your child receives the following services: IEP Speech 504 Plan

Why are you requesting open enrollment? _____

→ Please **PRINT** your first and last name _____

I certify that all of the information listed above is true and that I have full legal custody/guardianship of my child.

→ Parent/guardian signature: _____ Date: _____

An application must be submitted for each school year. **If your child is approved for this transfer, you must make the arrangements for transporting him/her.** If your child participates in athletics, he/she will be subject to the rules of the Ohio High School Athletic Association.

The undersigned certifies that the information provided above is accurate. Should any of this information be false, I agree to pay the current tuition rate for The Elyria City Schools as specified by Section 3317.08 of the Ohio Revised Code, for each student listed above while illegally attending the Elyria City School District. Further, I understand that non-payment could result in my being referred to a collection agency and/or court of appropriate jurisdiction. I also waive my right to confidentiality of this information and allow the Elyria City School District to use any legal means necessary to verify my residence.