

MCDONALD LOCAL SCHOOL DISTRICT

OPEN ENROLLMENT APPLICATION for the 2025-2026 School Year

STUDENT INFORMATION

Student's Name _____
Last First Middle

Male _____ Female _____ Race _____

Address _____

City _____ Zip _____

Grade Level of Student for 2025-2026 _____

Previous School Attended (Including Preschool for incoming Kindergarten students)

Name _____

Address _____

Home School District _____ Is your child currently being home schooled? _____

FAMILY INFORMATION

Father's Name _____

Address _____

Occupation _____

Cell / Home Phone Number _____ Marital Status _____

Email Address _____

Mother's Name _____

Address _____

Occupation _____

Cell / Home Phone Number _____ Marital Status _____

Email Address _____

Person with whom the student resides _____

**All correspondence regarding this student will be mailed to the custodial parent / guardian at the above address. Please specify.

**Please note any of the following:

A. Medical Problems _____

B. Activity Restrictions _____

C. Current Medications _____

D. Special Needs in Previous Schools (Has ETR / IEP, 504, Speech, Hearing, Gifted, Visual Impairments, etc...)

Has your child been suspended or expelled from his / her previous school?

Yes _____ No _____

If yes, please explain: _____

Do you currently have any other children enrolled in our school district through open enrollment?

Yes _____ No _____

Please include the following documents, along with this application:

- A. Copy of Birth Certificate**
- B. Proof of Residency (Utility bill with your name and address)**
- C. Immunization Records**
- D. Social Security Card**
- E. Custody Papers (if applicable)**
- F. Transcripts from current school (grades 8-12)**
- G. ETR / IEP paperwork for special education students (if applicable)**
- H. **Last report card of the current school year**

****IF APPLICATION IS BEING MADE FOR A KINDERGARTEN CHILD, THE CHILD MUST BE FIVE (5) NY AUGUST 1ST IN ORDER TO BE ELIGIBLE TO ENROLL FOR THE 2025-2026 SCHOOL YEAR.**

Parent / Guardian _____
Date

FOR OFFICE USE ONLY:

Received by _____ Date ___ / ___ / _____ Time _____
Approved by _____ Rejected by _____