

**MCDONALD LOCAL SCHOOL DISTRICT**  
**OPEN-ENROLLMENT APPLICATION**  
**2022-2023 SCHOOL YEAR**

**STUDENT INFORMATION**

Student's Name \_\_\_\_\_  
Last First Middle

Male \_\_\_\_\_ Female \_\_\_\_\_ Race \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Grade Level of Student for **2022 - 2023** \_\_\_\_\_

Previous School Attended \_\_\_\_\_

Address \_\_\_\_\_

Home School District \_\_\_\_\_ Is your child currently being home schooled? \_\_\_\_\_

**FAMILY INFORMATION**

Father's Name \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_

Work No. \_\_\_\_\_ Home No. \_\_\_\_\_

Marital Status \_\_\_\_\_ Cell No. \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_

Work No. \_\_\_\_\_ Home No. \_\_\_\_\_

Marital Status \_\_\_\_\_ Cell No. \_\_\_\_\_

**(OVER)**

Person with whom 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 name and address)**
- c. **Immunization Records**
- d. **Social Security Card**
- e. **Custody Papers (if applicable)**
- f. **Transcript from current school (grades 8 thru 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) BY AUGUST 1st IN ORDER TO BE ELIGIBLE TO ENROLL FOR THE 2022-2023 SCHOOL YEAR.**

\_\_\_\_\_  
Parent/Guardian Date

**FOR OFFICE USE ONLY:**

Received by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_\_

Approved by \_\_\_\_\_ Rejected by \_\_\_\_\_