

## BATH LOCAL SCHOOLS OPEN ENROLLMENT APPLICATION (2024-2025 School Year)

Date:	
	plicant or Renewal: applicants are not guaranteed a spot)
2024-25	Grade Level:

**APPLICATION DEADLINE: MAY 1, 2024** 

## A SEPARATE APPLICATION MUST BE COMPLETED FOR EACH STUDENT SEEKING OPEN ENROLLMENT

	it ate) (First)	(Middle	2)	(Last)
•	, , ,	•		tificate):
Parent/Guardian Na				
(Please print)	(First)	(Middle	<del>(</del> )	(Last)
Address:		City:		Zip:
Home Phone:	Cell Pho	ne:	Relationship to st	udent:
Please list all school	aged siblings (even if not	applying to open enroll at	Bath Local Schools):	
Name:		Grade: Curren	t School:	
Name:		Grade: Curren	t School:	
Name:		Grade: Curren	t School:	
Name:		Grade: Curren	t School:	
School District of Re	esidence:(student must be	registered in home distric	ct):	
	our student currently atten			
	of Attendance: Bath			045765
•	request:			
	·			
Is your child current	tly on an IEP or have a dis	ability? Yes: No:	_ If yes, what disabil	ity?
Uaa vaur ahild baan	expelled or suspended fro	m school? Yes:	No:	
nas your crilia been				
•	ld expelled for 10 consecut	ive days during the curren	it or preceaing schoo	I term? Yes: No:
If yes, was your chil Bath Local Schools <u>y</u>	will not provide bus trans	portation for open enrollme	ent students. A copy	of Bath Local Schools
If yes, was your chil Bath Local Schools <u>y</u>		portation for open enrollme	ent students. A copy	of Bath Local Schools
If yes, was your chil Bath Local Schools <u>v</u> Open Enrollment Po	will not provide bus trans licy is available upon requ	portation for open enrollme	ent students. A copy e it required to proce	of Bath Local Schools
If yes, was your chil Bath Local Schools of Open Enrollment Position Signature of Pare	will not provide bus trans licy is available upon reque ent/Guardian	portation for open enrollmest. One proof of residence	ent students. A copy e it required to proces  Date	of Bath Local Schools ss this application.
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