MAPLETON LOCAL SCHOOL DISTRICT
INTERDISTRICT OPEN ENROLLMENT APPLICATION
2019 – 2020 School Year

ALL STUDENTS MUST ENROLL IN THEIR RESIDENT DISTRICTS TO PARTICIPATE IN THIS PROGRAM

This is a: ☐ New Request ☐ Renewal/Continuation Today's Date: _____

School District of Residence _____ Date of Enrollment in District of Residence _____

Student Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY ZIP CODE

Birthdate ____ / ____ / ____ Gender _____ Race _____ Phone _____

Birthplace (as it appears on the birth certificate) _____ Grade for 19/20 _____

Student's *Current* District and Building of Attendance _____

Does your child receive special education services? ☐ Yes ☐ No If yes, please give eligibility category and IEP due date: _____

Is your child in a gifted program? ☐ Yes ☐ No If yes, please describe: _____

Is your child currently under expulsion or suspension, or in the process of having an expulsion or suspension from another school district? ☐ Yes ☐ No

If yes, please explain (attach document if necessary): _____

HIGH SCHOOL and MIDDLE SCHOOL students should list desired classes or vocational programs: _____

Reasons for choosing Mapleton Local Schools: _____

Parent/Guardian _____ Relationship _____

Please attach a copy of the student's birth certificate, immunization record, official transcript or grade card, and proof of residence (utility bill, rental or purchase agreement). A current IEP and ETR or parental custody papers must also be included, if applicable. This application will not be processed without the appropriate documents. If your child attended Mapleton Local School last year, you do not need to provide these documents again. Please check "Already on File" below. Requests will be acted upon not later than July 15, 2019.

The required documents are: ☐ Attached ☐ Already on File

This application must be submitted by mail and postmarked between March 1 – June 15, 2019. Please mail to: Scott Smith, Superintendent, Mapleton Local Schools, 635 County Road 801, Ashland, OH 44805.

I have read the guidelines of the interdistrict open enrollment plan and agree to abide by the procedures and policies that have been established.

_____ _____
Signature of Parent/Guardian Date

Note: **Students who owe Mapleton fees of any kind for prior school years, or owe money for fundraisers of any other amounts, MUST pay these amounts before an application for open enrollment will be accepted for the 2019-2020 school year.** Any of the above questions answered untruthfully may deem this application null and void and no further action will be taken to consider the student for open enrollment into Mapleton Local Schools.

Step 1: Reviewed/Signed by **Building Principal**

☐ Approved ☐ Denied Reason: _____

_____ _____
Signature of Building Principal Date

Step 2: Reviewed/Signed by **Special Education Program Director**

☐ Approved ☐ Denied Reason: _____

_____ _____
Signature of Special Education Program Director Date

Step 3: Reviewed/Signed by **Superintendent**

☐ Approved ☐ Denied Reason: _____

_____ _____
Signature of Superintendent Date

☐ Decision Letter to Parent/Guardian _____ ☐ DASL _____ ☐ District of Residence Notification _____

Revised 4/24/19