



9760 W. National Road
New Carlisle, OH 45344
(937) 845-3576

2018-2019

**Tecumseh Local School District
Interdistrict Open Enrollment Application**

Directions:

- Complete this form fully and accurately. Missing or inaccurate data may lead to errors in processing or denial of your application. Deliberately providing false information may be grounds for denial.
- Completed form must be submitted to Tecumseh Local Schools by May 31, 2018.

<p>Please Check One</p> <p><input type="checkbox"/> Returning Open Enrollment</p> <p><input type="checkbox"/> Former Resident</p> <p><input type="checkbox"/> New to District</p>	<p>Grade Level of Student</p> <p>_____</p> <p>(K-12)</p> <p>For School Year 2018-19</p>	<p>Building Requested in Tecumseh Local School District</p> <p><input type="checkbox"/> Tecumseh High School <input type="checkbox"/> Medway Elementary</p> <p><input type="checkbox"/> Tecumseh Middle School <input type="checkbox"/> New Carlisle Elementary</p> <p><input type="checkbox"/> Donnelsville Elementary <input type="checkbox"/> Park Layne Elementary</p>
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Name of Current School District of Residence: _____
(District where parent/guardian resides)

Student's **Full** Name: (First) _____ (Middle) _____ (Last) _____

<p>Date of Birth _____</p> <p>Birth City _____</p> <p>Native Language _____</p>	<p>Parent/Guardian Name _____</p> <p>Street Address _____</p> <p>City/State/Zip _____ Phone _____</p>
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<p><input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Pacific Islander</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Black</p> <p><input type="checkbox"/> Hispanic <input type="checkbox"/> White</p> <p><input type="checkbox"/> Multiracial *</p> <p>This information is required to be submitted to the Ohio Department of Education and/or the US Department of Education. Failure to provide this information will require the district to use observer identification.</p>	<p>* If student is Multiracial please indicate below</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Black</p> <p><input type="checkbox"/> Pacific Islander <input type="checkbox"/> White</p> <p><input type="checkbox"/> Alaskan Native/American Indian</p>	<p>Is student from Hispanic/Latino heritage? (Hispanic/Latino means a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.)</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p>
<p>Gender</p> <p><input type="checkbox"/> female <input type="checkbox"/> male</p>		<p>Open enrollment begin date:</p>

YES NO

Has the student been suspended more than ten days or expelled at any time during the 2017-2018 school year or are any disciplinary proceedings pending that could lead to suspension or expulsion?

Is the student currently attending Tecumseh Local School District?

Are there siblings of the student currently attending Tecumseh Local School District? Name(s) _____

Are there siblings of the student also applying at this time?

Does the student receive special education? If yes, does the student have a current individualized education program (IEP) _____

Has the student been referred for a special education evaluation that has not yet been completed?

Signature of Parent/Guardian(s) (<u>SIGN</u>)	DATED	Parent/Guardian Name(s) (<u>PRINT</u>)
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For Office Use Only			
<input type="checkbox"/> Approved	SSID#:	Student ID#:	District of Residence IRN#:
<input type="checkbox"/> Denied - Reason for denial:			Notes:
Signature of school administrator:		Date:	Notification to District of Residence:
Received by:		Date:	<input type="checkbox"/> Mailed Date: <input type="checkbox"/> Faxed <input type="checkbox"/> Electronic mail