

**APPLICATION FOR STUDENT TRANSFER
 NEBRASKA ENROLLMENT OPTION PROGRAM
 2010/2011 SCHOOL YEAR**

SECTION 1: TO BE COMPLETED BY THE PARENT, LEGAL GUARDIAN, OR STUDENT (if an emancipated minor) requesting a transfer to attend a school district other than the district of residence. Between September 1 and March 15, this application must be sent, (postmarked) or delivered to the Option School District. If after March 15, this application MUST be accompanied by a WRITTEN release (waiver) from an authorized official of the Resident District or Section 2 must be completed by the resident school district.

Student Name (Last, First, M.I.)		Birthdate: Month _____ Day _____ Year _____ Sex: F <input type="radio"/> M <input type="radio"/>	
Parent/Guardian Name (Last, First, M.I.)		Mailing Address	Residence Address (if different)
City		Zip Code	Telephone Number (home/work)
Expected Grade Level at Time of Enrollment: K <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/>			
Does Student Require Special Education Services? (check one)		Yes <input type="radio"/>	No <input type="radio"/>
If Yes, Does the Student Have an Individualized Education Program (IEP)?		Yes <input type="radio"/>	No <input type="radio"/>
Is the Applicant a Sibling of a Current Option Student? (check one)		Yes <input type="radio"/>	No <input type="radio"/>
Has the Applicant Attended Option District for the Immediately Preceding 2 Years?		Yes <input type="radio"/>	No <input type="radio"/>
Does Applicant qualify for free or reduced price lunches?		Yes <input type="radio"/>	No <input type="radio"/>
Signature of Parent:		Date:	
Resident District Name and Number:		Building Currently Attending:	
Option District Name and Number:		Building Preference:	

Application must be sent or delivered to the Option School District

SECTION 2: TO BE COMPLETED BY THE RESIDENT SCHOOL DISTRICT (only if this application is submitted by the parent, legal guardian or student after the March 15 deadline).

The resident district waives deadline dates: _____		The resident district will not waive deadline dates: _____	
Reason for Denial (required):			
Name and Title of Authorized Official:			
Date:		Signature:	

SECTION 3: TO BE COMPLETED BY THE OPTION SCHOOL DISTRICT. Whether approved or denied, send photocopies to the Applicant, the Resident District and to the Department of Education.

OPTION SCHOOL DISTRICT NAME: _____		Date this Application Received: _____	
County _____	County-District Number _____	Phone Number _____	
The Option School District: Approves _____ (or) Disapproves _____ this application.			
Reason for Denial (required):			
If district approves this application, date student will begin attending Option District: Month _____ Day _____ Year _____			
Name and Title of Authorized Official:			
Date Application Accepted/Rejected:		Signature:	

CHANGE OF STATUS

To be completed by an authorized official of the Option District (or parent) when the Option student quits the option, withdraws the application prior to attending or if the Option student's Resident District changes for any reason and the student continues attending the Option District (original resident). **Send photocopies to the Applicant, the Resident District and the Department of Education.**

The Status of This Student is Changed for the Following Reason(s):		
<input type="checkbox"/> Withdrawal of the application prior to attending the present school year.	<input type="checkbox"/> Has completed the grades offered in the Option District.	<input type="checkbox"/> Attending High School in a district which is affiliated with the resident District.
<input type="checkbox"/> Cancellation of Enrollment Option during the present school year.	<input type="checkbox"/> Discontinuation of school attendance (moved away, deceased, etc.).	
<input type="checkbox"/> Other (Specify) _____		
Date Change of Status: Month _____ Day _____ Year _____		
New Mailing Address: _____		
City: _____	Zip Code: _____	Telephone Number (home/work): _____
New Resident School District Name: _____		
County: _____	County District Number: _____	Phone Number: _____
Name and Title of Option District Official (or parent): _____		
Date: _____	Signature: _____	

INFORMATION FOR COMPLETING THE ENROLLMENT OPTION APPLICATION FORM

Photocopies should be made for communication and coordination of the necessary information with Applicants, Schools, and the Department of Education.

When completing applications for the Enrollment Option Program, applicants and school officials should be aware of the following dates:

September 1:	Earliest date for submitting applications for the next school year.
March 15:	Deadline for filing applications unless a waiver of dates is granted.
April 1:	On or <u>before</u> this date, the Option District must inform the Resident District of all names of applications.
April 1:	Final date for option district to respond to the application.

DEFINITIONS:

Option School District:	A public school district the student chooses to attend other than his or her resident school district.
Option Student:	A student that has chosen to attend a public school district other than his or her resident school district, including a student who resides in a learning community and who has chosen to attend an option school district in such learning community prior to the effective date of the establishment of such learning community, but not including a student who resides in a learning community and who enrolls in another school district in such learning community.
Resident School District:	The public school district in which a student resides, or attends as a resident student.
Note:	The Resident and Option School Districts should retain this form until the student completes school or cancels the Enrollment Option.

DIRECTIONS FOR COMPLETING SECTION 1:

- The parent or legal guardian should complete this section. The student may complete this section if he or she is an emancipated minor.
- A separate application form is required for each applicant.
- Indicate in the appropriate spaces:
 - If the student needs Special Education services and has an individualized Education Program (IEP).
 - If the applicant has a sibling that is a current option student.
 - If the applicant has attended the option district for the immediately preceding two years.
 - (Optional) if the applicant qualifies for free or reduced price lunches.
- Applicant must currently reside in the Resident School District listed in Section 1 at the time of application.
- The application should be signed or delivered to the office of the superintendent of schools of the Option School District or to the president of the school board in those districts that do not have a superintendent of schools.

DIRECTIONS FOR COMPLETING SECTION 2:

- This is only needed if the application is made after March 15.
- If the Resident School District will not waive deadline dates, the reason for denial must be stated in the appropriate space.

DIRECTIONS FOR COMPLETING SECTION 3:

- If the Option School District approves the application, indicate by marking the appropriate space.
- Submission of an incomplete form is not an adequate reason to disapprove an application. The Option School District officials should secure a complete form prior to the March 15 deadline.
- If the Option School District disapproves the application, the reason for disapproval must be stated in the appropriate space.
- Whether approved or disapproved, photocopies of any application received by the March 15 deadline must be sent by April 1 to the Applicant, the Resident School District, and the Department of Education.
- **NOTE:** Applications submitted after the March 15 deadline must have Section 2 completed or be accompanied by a written release from the Resident School District that includes a statement of deadline waiver, the signature of the superintendent or school board president, and the date of such action. The application should also be sent to the Applicant, the Resident School District, and the Department of Education.

DIRECTIONS FOR COMPLETING THE CHANGE OF STATUS SECTION:

- When an Option student moves out of the Resident School District, completes grades offered in the Option School District, becomes a resident of the affiliated high school district or ceases to attend the Option School District for other reasons, the Option School District should complete the Change of Status section and send photocopies to the Applicant, the Resident School District and the Department of Education.
- When the parents seek to withdraw an application or cancel an approved Enrollment Option transfer, they may notify the Option District official who will then complete the Change of Status, or parents may complete the Change of Status and affix their own signature. In either case, copies must be provided to the Option and Resident districts and the Department of Education.

APPEAL PROCESS:

The parent or legal guardian may appeal a rejection of an application or of a request to release to the State Board of Education within thirty days after the date the notification of the rejection is received. A sample petition form for this appeal can be found in Appendix A of the Nebraska Department of Education's Rule 61 (<http://www.nde.state.ne.us/LEGAL/RULE61.html>).

If the Applicant or School District officials have questions or need assistance in completing this form, contact:

Nebraska Department of Education
Enrollment Option Program
301 Centennial Mall South
P.O. Box 94987
Lincoln, Nebraska 68509-4987
Telephone (402) 471-3323

Additional copies of the "Application of Student Transfer – Nebraska Enrollment Option Program" form may be downloaded from our website at: <http://ess.nde.state.ne.us/OrgServices/EnrollmentOption/ApplicationForm.htm>

Revised 6/9/09