



**INSTRUCTIONS:** Submit completed form to the district administrator of the nonresident school district. **Do not send this form to the Department of Public Instruction.**

Additional instructions and information are at the end of this form.

School Year for which Open Enrollment Exception is Requested <b>2018-19</b>	Date Received in Nonresident School District <i>Mo./Day/Yr.</i>
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Collection of this data is a requirement of s. 118.51, Wisconsin Statutes.

**I. GENERAL INFORMATION**

To be completed by the parent or legal guardian (or the pupil if age 18 or older). The form must be submitted to the nonresident school district with any required documentation (see back of form).

Legal Name of Pupil <i>First, Middle Initial, Last (A separate form must be completed for each pupil)</i>	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Birthdate <i>Mo./Day/Yr.</i>
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Name of Parent or Legal Guardian	Home Phone <i>Area/No.</i>
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Work Phone <i>Area/No.</i>	Cell Phone <i>Area/No.</i>	Email
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Mailing Address	City	State	ZIP
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Street Address <i>If different than above</i>	City	State	ZIP
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What grade will the pupil be in for the 2018-19 school year? <input type="checkbox"/> 5-year-old Kindergarten <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	<input type="checkbox"/> PreK <b>or</b> 4-year-old Kindergarten <input type="checkbox"/> Early childhood /special education <i>Only if resident district also offers program and child is eligible.</i>
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**Nonresident School District** This is the school district the pupil is applying to attend. You may apply to no more than three (3) school districts in a school year. You must apply to each school district separately. If you submit applications to more than three (3) school districts, all applications will be invalid.

**Optional**—If you are applying for the pupil to attend a specific school(s) or program(s) in the nonresident school district, indicate here. *Enrollment in a specific school or program is not guaranteed.*

**Resident School District** This is the school district in which you are currently residing. *You must indicate a school district here.*

What school district, private school, or home-based education program is the pupil currently attending?

**Yes No**

- Is the pupil currently attending public school in the nonresident school district?
- Are siblings of the pupil currently attending public school in the nonresident school district? *Name(s)*
- Are siblings of the pupil also applying at this time to attend the nonresident school district? *Name(s)*
- Does the pupil have an individualized education program (IEP)?
- Does the pupil currently receive special education services?
- Has the child been referred for a special education evaluation that has not yet been completed?

<b>Parents are responsible for transportation. If the pupil is eligible for free or reduced-price lunches under the School Lunch Program, you are eligible to apply for reimbursement of transportation costs at the end of the school year.</b>  <input type="checkbox"/> Check if you are interested in applying for transportation reimbursement.	No. of Pupils Transported	No. of Miles Round Trip
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—OVER—

This application is not valid unless Page 2 is completed.

**II. REASON(S) FOR REQUEST**  
*Choose all that apply*

<input type="checkbox"/> The pupil's resident school board has determined that the pupil has been the victim of a violent criminal offense. Attach a copy of any finding by the resident school board or a statement by an administrator of the resident school district explaining the reason for the finding. Attach an explanation of the circumstances leading to this request.	Date of Resident School Board Determination <i>Mo./Day/Yr.</i>
<input type="checkbox"/> The pupil is or has been homeless in the current or immediately preceding school year. Attach an explanation of the circumstances leading to this request.	
<input type="checkbox"/> The pupil has been the victim of repeated bullying or harassment. Attach an explanation of the circumstances leading to this request. Include the date(s) on which the bullying or harassment was reported to the school district, the person(s) to whom the bullying or harassment was reported, any attempts by the pupil, parent, and/or school district to halt the bullying or harassment, and the result of these attempts.	
<input type="checkbox"/> The place of residence of the pupil's parent or guardian and of the pupil has changed as a result of military orders. Attach a copy of the orders and an explanation of circumstances caused by the issuance of orders that led to this request.	Date Military Orders Issued <i>Mo./Day/Yr.</i>
<input type="checkbox"/> The pupil has moved into this state. Attach an explanation of the circumstances leading to this request.	Date Pupil Moved into State <i>Mo./Day/Yr.</i>
<input type="checkbox"/> The pupil's residence has changed as a result of a court order or custody agreement or because the pupil was placed in a foster home or with a person other than the pupil's parent, or removed from a foster home or from the home of a person other than the pupil's parent. Attach a copy of any court order, custody agreement, or other document pertaining to the change of the pupil's residence. Attach an explanation of the circumstances that lead to this request.	Date Pupil Changed Residence <i>Mo./Day/Yr.</i>
<input type="checkbox"/> An exception to the open enrollment application period is in the best interest of the pupil. Attach an explanation of the circumstances leading to this request.	

**III. SIGNATURE**

**I AM THE PARENT OR LEGAL GUARDIAN** of the above-named pupil or I am the pupil age 18 or older. I am submitting an open enrollment alternative application for the reason(s) given above. All of the requested information is provided and is complete and correct. I grant permission to the school district my child is attending to provide a copy of my child's individualized education program (IEP) and acknowledge that the school district my child is attending may provide a copy of any expulsion order or information about any pending disciplinary proceeding involving the pupil.

Signature of Parent or Legal Guardian or Pupil if 18 or Older  	Date Signed <i>Mo./Day/Yr.</i>
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**IV. INSTRUCTIONS**

**Instructions to the Parent/Legal Guardian or Adult Pupil**  
 Complete this form, include all attachments, and send or deliver this form to the nonresident school district to which you are applying. You may apply to no more than three nonresident school districts in this school year.

The nonresident school district may deny the application for the same reasons it may deny an application submitted during the open enrollment application period. There is no provision in the statutes for parents to appeal a nonresident school district's decision.

The resident school district may only deny an application for the following reasons:

- The resident school district determines that the criteria relied on by the applicant does not apply to the pupil.
- The resident school district does not agree that the transfer is in the best interest of the pupil.

The resident district may not deny an application if it is based on the resident school district's finding that the pupil has been the victim of a violent crime.

The pupil's parent may appeal the resident district's decision to the department within 30 days after the decision.

**Instructions to the Nonresident School District**  
 Immediately upon receipt of this form, send a copy of the form and all attachments to the resident school district indicated on the form.

Within 20 days of receiving the form, notify the parent, in writing, whether the application is approved or denied.

The nonresident school district may deny the application for the same reasons it may deny an application submitted during the regular open enrollment application period.

The nonresident school district may deny the application if it does not agree that the transfer is in the best interest of the pupil.

**Instructions to the Resident School District**  
 Within 10 calendar days of receiving this form, send a copy of the individualized education program (IEP) if the pupil is a child with a disability, and of any expulsion order or information about any pending disciplinary proceeding concerning the pupil.

Within 20 calendar days of receiving this form, notify the parent, in writing, if the application is denied.

The resident school district may only deny an application for the following reasons:

- The resident school district determines that the criteria relied on by the applicant does not apply to the pupil.
- The resident school district does not agree that the transfer is in the best interest of the pupil.

The resident district may not deny an application if it is based on the resident school district's finding that the pupil has been the victim of a violent crime.