

UTAH STATE BOARD OF EDUCATION

STANDARD OPEN ENROLLMENT APPLICATION FOR THE DAVIS SCHOOL DISTRICT

Date: _____ ☐ In District ☐ Out of District # Assigned _____ ☐ \$5.00 Paid

Please check appropriate box:

<p>Early Enrollment Period Transfer Application:</p> <p><input type="checkbox"/> Must be submitted between Nov 15th and the first Friday in February in order to transfer the following year.</p> <p><input type="checkbox"/> Year requested: 20 _____</p>	<p>Late Enrollment Period Transfer Application:</p> <p><input type="checkbox"/> Submitted after the first Friday in February</p> <p><input type="checkbox"/> Current year: 20 _____</p> <p><input type="checkbox"/> Year: _____</p>
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An enrolled nonresident student shall be permitted to remain enrolled, subject to the same rules and standards as resident students, without renewed applications in subsequent years unless any of the following occurs:

- * The student graduates or is no longer a Utah resident
- * The student is suspended or expelled from school
- * The district determines that enrollment will exceed the open enrollment threshold

Student Name: _____ Current Grade: _____ Student #: _____

Legal Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Birthdate: _____ Current School: _____

Boundary School: _____ Requested School: _____

Reason for request: _____

The student is living with ☐ Parents OR ☐ Legal Guardian* **Attach evidence of legal guardianship

Does the student have a sibling(s) attending the requested school? ☐ No ☐ Yes* *If yes current grade of sibling(s): _____

Has the student recently been served by Special Education (including resources services)? ☐ No ☐ Yes*

*If yes, dates served _____ to _____ District of Service: _____

I understand that all transfer requests are contingent on early enrollment school capacity (maximum capacity) or late enrollment school capacity (adjusted capacity), special program limitations, staff availability, and/or circumstances under UCA Section 53G-6-402(4)(c). If this request is granted, I agree that my child must remain at the requested school through the end of the requested school year. **I understand that, as parent or guardian, I am responsible for transportation of my student to and from school.** I understand that a student's acceptance into a school or school district does not establish UHSAA eligibility.

Print Parent/Guardian Name: _____ Email: _____

Parent/Guardian Signature: _____

☐ Approved ☐ Denied Signature of Principal or District Official: _____ Date: _____

- **A student may be denied an open enrollment opportunity if the student has been suspended or expelled from a public school consistent with UCA Section 53G-6-403(3)(b).**
- A student with prior behavior problems may be **granted provisional enrollment** provided the student and parent sign an agreement with the school or the school district (1) establishing the conditions of continued enrollment and (2) notifying the parents/student that the student will be excluded from the school if the agreement is violated. The school or school district is responsible for the agreement as allowed under UCA Section 53G-6-403(3)(c).