

BLOOMFIELD-MESPO LOCAL SCHOOLS

Open Enrollment Application

- Complete one form per student.

Date \_\_\_\_\_ District of Residence \_\_\_\_\_

Student's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Street/City Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Home Phone # \_\_\_\_\_ Other Phone # \_\_\_\_\_

School District and Building presently attending \_\_\_\_\_

Student's Current Grade Level \_\_\_\_\_ Grade level sought for upcoming year \_\_\_\_\_

Is student enrolled in any special education or tutorial programs? Yes or No

If yes, please explain \_\_\_\_\_

If request is for high school enrollment, list desired classes \_\_\_\_\_

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School Office Use Only

Rec'd by \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Approved \_\_\_\_\_ Superintendent \_\_\_\_\_

Rejected \_\_\_\_\_ Principal \_\_\_\_\_

Reason \_\_\_\_\_

Copies: \_\_\_\_\_ Applicant Family    \_\_\_\_\_ Principal/Secretary    \_\_\_\_\_ District of Residence School District  
          \_\_\_\_\_ Supt. Office            \_\_\_\_\_ EMIS                            \_\_\_\_\_ Treasurer