APPLICATION FOR OPEN ENROLLMENT OF NONRESIDENT STUDENT

Student name:	Birthdate:	
Parent/Legal Guardian name:		
Physical address:		
Parent/Legal Guardian phone:	E-Mail:	
County of residence:		
Requested Marshall County School:		
Does the student currently have or requi If yes, please attach a copy of the IEP or		?
Does the IEP require transportation	on to be provided by the school?	
Has the student committed a Level 3 or If yes, please attach the relevant disciplination		e past year?
Parent/Legal Guardian must initial each	of the following:	
I have read the Open Enrollment P	olicy of Marshall County Schools.	
I understand that the Marshall Couhave filled it out completely and correct	nty Board of Education may not conly.	sider this application until I
I understand that the Marshall Courare siblings of students already enrolled completed the 10 th grade but whose fam complete their education in their previous Marshall County Schools employees; where the proximately located to a school in Marshall a portion of a contiguous county where the make it impracticable for the students to	ily has since relocated to another cours school; who are the children, grand ho reside in another county but whose hall County, either by mileage or travestopography, impassable roads, long be	ent Policy; who have anty and who wish to dchildren, or legal wards of e residences are more yel time; and/or who reside in
I understand that the Marshall Coufollowing reasons as they relate to my no programs or services due to areas identifia Level 3 or Level 4 inappropriate behavior	fied in the county's critical needs pol	level capacity, (2) lack of
I understand that the Marshall Counonresident student if any of the followin nonresident student: (1) lack of grade levidentified in the county's critical needs prinappropriate behavior.	vel capacity, (2) lack of programs or	ol year as they relate to my services due to areas
I understand that the Marshall Coutransportation to my nonresident student necessary for the fulfillment of that IEP.		-

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Parent/Legal Guardian Signature	Date
By signing this application, I verify that the information the best of my knowledge.	contained herein is true and accurate to
I understand that in the event that I receive an unfavorappeal that decision, I must submit my appeal to the State S days of the decision.	±.±.
I understand that my nonresident student will automate Schools each year unless: (1) Marshall County Schools has one of the three reasons listed above (lack of grade level ca commission of a Level 3 or Level 4 behavior) or (2) I terminate of the terminate of the standard property of the student will automate the school of the standard property	reason to terminate the open enrollment for pacity, lack of programs or services, or
I understand that the Marshall County Board of Education my student's eligibility to participate in extracurricular a transfer is subject to the rules of the West Virginia Secondathe county board has no control.	ctivities at the requested school because the

Please submit the completed application to:
Tracy Mercer
Attendance Director
Marshall County Schools
214 Middle Grave Creek Road
Moundsville, WV 26041
tlagos@k12.wv.us

If you have any questions regarding how to complete the application, please contact Tracy Mercer, Attendance Director.