

`2021-2022
SELIGMAN UNIFIED SCHOOL DISTRICT
OPEN ENROLLMENT
ATTENDANCE APPLICATION
File this application at the School District Office

Student's Name: _____
Last First MI

Grade for 2021-2022 _____ Birth Date: _____

Phone Number: _____
Home Message Work

Parent's Name: _____
Last First MI

Home Address: _____
Street City Zip

Mailing Address: _____
Box # City Zip

Siblings residing in your home:

Name Age Name Age

Name Age Name Age

Present school of attendance (**Please attach transcript or final grades, attendance records and discipline records. *This application is incomplete without the required records.***)

School: _____ District: _____
City: _____ County: _____

Is the student making application:

Yes No Expelled or long-term suspended from any school or school district?

Yes No Currently subject to expulsion or long-term suspension from a school or school district?

Yes No N/A In compliance with conditions imposed by a juvenile court?

Yes No N/A In compliance with a condition of disciplinary action in any school or school district?

The following conditions apply to the open-enrollment program:

1. An attendance application must be completed and submitted.
2. Enrollment is subject to the capacity limit established for the school and/or its grade levels.
3. The parent or legal guardian will be notified in writing whether the application has been accepted, rejected, or placed on a waiting list.
4. Transportation for the student may be the responsibility of the parent or legal guardian.
5. Providing false information on this form may result in the application being denied or admission being revoked.

The signatory affirms that the student will abide by the rules, standards, and policies of the school and the District if enrolled.

Signature of Parent or Legal Guardian

Date

FOR DISTRICT USE ONLY. DO NOT WRITE BELOW THE LINE

Accepted

Placed on Waiting List

Rejected

Reason for rejection _____

Administrator

Date