

# BELLEFONTAINE CITY SCHOOL DISTRICT

## 2018 – 2019

### INTERDISTRICT OPEN ENROLLMENT

820 LUDLOW ROAD  
BELLEFONTAINE, OHIO 43311

Telephone: 937-593-9060  
Fax: 937-599-1346

Full, LEGAL Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

SSN (Opt.): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Student's Birth City: \_\_\_\_\_ Sex: M \_\_\_ F \_\_\_ 2018-2019 Grade Level: \_\_\_\_\_

Parent/LEGAL Guardian Name(s): \_\_\_\_\_ Telephone: \_\_\_\_\_

**LEGAL Guardian's Address\***: \_\_\_\_\_  
(No PO Boxes accepted.) Street City Zip

County of Residence: \_\_\_\_\_ School Attended Most Recently: \_\_\_\_\_

Did **LEGAL Guardian** recently move to this address?\* Yes \_\_\_ No \_\_\_ **If yes, PLEASE GIVE MOVING DATE:** \_\_\_\_\_

MM / DD / YY

\*If address or student is **NEW**, **proof of residency** (e.g. utility bill) or **School District Residency Form MUST BE ATTACHED** to application.

This student's District of Residence (Please check):

\_\_\_ Benjamin Logan \_\_\_ Indian Lake \_\_\_ Riverside \_\_\_ West Liberty-Salem \_\_\_ Other: \_\_\_\_\_

We are required by the Federal Government to report the following information. **Please answer BOTH of the following questions:**

→ **1) Is this student of Hispanic / Latino origins?** Yes \_\_\_ No \_\_\_

→ **2) What is this student's race?** (If Multiracial, please mark all that are applicable.)

\_\_\_ White *People who have origins in any of the original peoples of Europe, North Africa, or the Middle East*

\_\_\_ Black or African American *Persons having origins in any of the black racial groups in Africa*

\_\_\_ Asian *Persons having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, Vietnam*

\_\_\_ American Indian or Alaskan Native *Persons having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.*

\_\_\_ Native Hawaiian or Other Pacific Islander *Persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands*

NOTE: When the parent or guardian refuses to provide their child's racial group, the District shall use observer identification. This designation is required to be communicated to the parent or guardian by the District prior to designation.

→ **Is this student currently enrolled in a Special Education or Tutorial Program?** \_\_\_ Yes \_\_\_ No

If Yes, please list program: \_\_\_\_\_

I have read the stipulations of the Interdistrict Open Enrollment Guidelines (on the reverse side of this application), and agree to abide by the procedures and policies that have been established.

**In the case of divorce or separation, a copy of the most recent legal custody determination by a court is REQUIRED.**



\_\_\_\_\_  
**PARENT/LEGAL GUARDIAN SIGNATURE**

\_\_\_\_\_  
**DATE**

**Email address:** \_\_\_\_\_

**For Office Use Only:** Date Application Received: \_\_\_\_\_ Approved \_\_\_ Denied \_\_\_

Building Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

BCSD STUDENT ID #: \_\_\_\_\_

**DEADLINE FOR SUBMISSION: AUGUST 1, 2018**

Rev. 02/2018

BELLEFONTAINE CITY SCHOOL DISTRICT  
**INTERDISTRICT OPEN ENROLLMENT PROGRAM GUIDELINES**  
FOR THE 2018-2019 SCHOOL YEAR

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**APPLICATION PROCEDURE:**

Applications for participation in the Interdistrict Open Enrollment Program may be obtained at the Bellefontaine City Schools Board of Education Office, 820 Ludlow Road, or at any of the school buildings. An application shall be submitted for each student requesting open enrollment. Each application will be acted upon in a timely manner. Parents/guardians will be notified of acceptance or denial in writing. Bellefontaine City Schools will also notify the district of residence of the student(s). If a student has been accepted into the Bellefontaine City School District and the parents or guardians have accepted such a placement, the student shall initiate enrollment procedures at the building he or she will be attending. A student accepted for interdistrict open enrollment will not be released to his or her resident school district for a period of one year.

**SELECTION CRITERIA:**

1. Students who are residents of the school districts in the State of Ohio are eligible to participate in the Interdistrict Open Enrollment Program.
2. Students who were enrolled in the Bellefontaine City School District during the 2017-2018 school year shall have first consideration to participate in this program during the 2018-2019 school year.
3. Students whose applications are accompanied by a recommendation of the Superintendent of the contiguous school district because of a special need will have next consideration.
4. The date filed will be noted on all applications. Available classroom spaces will be filled on a "first come, first served" basis, after students with a higher priority are approved.
5. All approvals are on an annual basis. An application must be submitted each school year in accordance with the Interdistrict Open Enrollment Program criteria.
6. Applications may be rejected if the racial balance of either the sending or receiving school district would be negatively impacted.
7. Student selection shall not restrict consideration because of athletic, artistic, academic or extracurricular ability, handicapping conditions, language barriers, or disciplinary conditions other than those provided in Section 3313.98 (c) (4) of the Ohio Revised Code.

**ASSIGNMENT CRITERIA:**

1. The Bellefontaine School District strives to maintain grade, building, and program class size balances. Classroom capacity is defined as not to exceed twenty-five (25) students in grades K-12. The number of available teachers and classroom spaces will define building capacity. Program capacity will be defined by State and Board established capacities for that program.
2. Resident students shall always have first consideration in course, program, or school assignments.
3. The Bellefontaine City School District is not required to add staff, courses of study, or special education units to accommodate interdistrict open enrollment students.

No student, once accepted by the Bellefontaine City School District into the Interdistrict Open Enrollment Program, will be displaced should enrollments exceed the limits stated above.

**DISCIPLINE:**

Students suspended and/or expelled by the adjacent district for ten (10) consecutive days or more during the present or preceding semester for which application has been made shall not be eligible to participate in the Interdistrict Open Enrollment Program.

**TRANSPORTATION:**

Transportation for students participating in the Interdistrict Open Enrollment Program shall be the responsibility of the parent/guardian of the student, unless the student's transportation needs may be met by established Bellefontaine City School District transportation schedules.

**ATHLETIC ELIGIBILITY:**

Student athletes who transfer to participating districts through the Interdistrict Open Enrollment Program are subject to the Ohio High School Athletic Association by-laws governing athletic eligibility.