

WINCHESTER PUBLIC SCHOOL NONRESIDENT STUDENT APPLICATION

This application is to be completed by all parents/guardians of students who are applying for nonresident enrollment in Winchester Public Schools. Applications will be received between July 1 and July 31 preceding the school year for which application is made. Applications received after that date will not be processed until all applications received prior to July 31 have been acted upon.

New Nonresident Application Continuation Application

School Year for Request: _____

1. Student's Name: _____
2. Date of Birth: _____
3. Anticipated Grade Placement: _____
4. Parent or Legal Guardian: _____
5. Address: _____

City	State	Zip Code
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6. Telephone Number: Home: _____ Work: _____ Cell: _____
7. Email Address: _____
8. Name of school last attended: _____
Telephone Number: _____
9. Reason for leaving last school: _____
10. Reason for wishing to enroll in Winchester Public Schools: _____
11. Are you a full or part time employee of Winchester Public Schools: Yes No
Full Time _____ Part Time _____ School: _____
12. Are you a full or part time employee of the City of Winchester: Yes No
Full Time _____ Part Time _____ Department: _____
13. Will your child need special education services under IDEA II or Section 504 of the Rehabilitation Act? Yes _____ No _____
14. If you answered "Yes" to the above question, please attach all eligibility documents and most current IEP to this application.
15. Please initial this section indicating that you understand that either you or the school division (if services are not available in your home school division) of your residence must bear the actual cost of any special education services your child may receive. _____

16. Has your child experienced any attendance or serious discipline problems in his/her previous school? Yes _____ No _____

17. If "yes" to the above question, please explain: _____

18. Are there any criminal or civil charges pending against your child: Yes _____ No _____

19. I certify by my signature that all information provided in this application is correct and that if my child is accepted as a student in Winchester Public Schools I will pay in a timely manner all applicable tuition charges. I further acknowledge that Winchester Public Schools reserve the right to assign my child to any appropriate school where space is available.

Signature: _____ Date: _____

20. Parents of students in Winchester Public Schools may request assignment to a specific school for their child if such assignment would alleviate a family hardship or meet a significant educational need, such requests are granted on an individual basis and will be considered only if space is available at the school requested. If you wish to request an assignment to a specific school, please complete the following section.

School Requested 1st Choice: _____

School Requested 2nd Choice: _____

Reason for Request: _____

Signature: _____ Date: _____

For Office Use Only

1. Student Support Specialist's Comments: _____

Signature: _____ Date: _____

2. School Assignment: _____

School Official: _____ Date: _____

Approved:

March 17, 2003, Revised September 6, 2005, May 26, 2009, May 20, 2010, April 26, 2016,
March 31, 2023