

**WINCHESTER PUBLIC SCHOOL
NONRESIDENT STUDENT APPLICATION**

This application is to be completed by all parents/guardians of students who are making application for non-resident 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**

1. Student's Name: _____
2. Date of Birth: _____
3. Anticipated Grade Placement: _____
4. Parent or Legal Guardian: _____
5. Address: _____
6. Telephone Number: Home _____ Work _____ Cell _____
7. Name of school last attended: _____
Telephone Number: _____
8. Reason for leaving last school: _____
9. Reason for wishing to enroll in Winchester Public Schools: _____
10. Are you a full or part time employee of Winchester Public Schools: Yes No
Full time _____ Part Time _____ School: _____
11. Are you a full or part time employee of the City of Winchester: Yes No
Full time _____ Part Time _____ Department: _____
12. Will your child need special education services under IDEA II or Section 504 of the Rehabilitation Act?
Yes _____ No _____
13. If you answered "Yes" to the above question, please attach all eligibility documents and most current IEP to this application.
14. 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. _____
15. Has your child experienced any attendance or serious discipline problems in his/her previous school?
Yes _____ No _____
16. If "Yes" to the above question, please explain: _____
17. Are there any criminal or civil charges pending against your child: Yes _____ No _____

18. 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: _____

19. 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
