

Bowling Green City School District
INTER-DISTRICT ENROLLMENT
for students living outside the BGCSD
ADMINISTRATIVE REGULATIONS/APPLICATION PROCESS

In accordance with Board of Education policy, the following procedures shall apply:

Parents/guardians of students residing in an adjacent school district may request that their child(ren) attend a school in the Bowling Green School District by submitting a written inter-district transfer request form, **in person, by June 10 for the following year to the Office of the Superintendent** for *each* child entering kindergarten through twelfth grade. Applicant must provide proof of residence at this time; driver's license is *not* sufficient for this purpose. It is the parent/guardian responsibility to notify the school of any change of address for the student that occurs during the school year.

Application **must be re-submitted** for each successive school year that the parent(s)/guardian(s) desires to have their child(ren) attend a Bowling Green school other than their home district school. This application should be submitted, in person, to the Office of the Superintendent by **June 10 for the following year**. Applicant must provide proof of residence at this time; driver's license is *not* sufficient for this purpose. It is the parent/ guardian responsibility to notify the school of any change of address for the student that occurs during the school year.

If an inter-district transfer request is not re-submitted, the child(ren) will return to and attend his/her home district school.

Resident students of Bowling Green School District shall be given preference over non-resident students with regard to placement in classes, courses, programs or schools.

Applicants may be denied for one or more of the following reasons, as provided by Section 3313.97 of the Ohio Revised Code.

- 1) If grade level/course capacity reaches reasonably accepted limitations. (Grade level, building and program balance will be maintained. Class sizes will be distributed equitably, as much as practicality permits, across all elementary buildings.)
 - a) These limitations shall take into consideration the special education students being included in or mainstreamed into regular classrooms. (Non-resident students receiving special education services will be permitted to enroll in Bowling Green Schools only if space and the specific services specified in the student's I.E.P. [please attach copy] are currently available.)
 - b) Administration reserves the right to add or reduce class size as dictated by enrollment to minimize busing of students from one elementary attendance area to another.
 - c) For open enrollment planning purposes, a cap of eighteen (18) students per elementary classroom, **220** students per grade level at the Middle School and 250 students per grade level at the High School will be in place. This permits the district to respond more effectively to enrollment situations as the beginning of the school year approaches.
- 2) If a student enrolled or living in the Bowling Green School District attendance area would have to be displaced.
- 3) If a student has been suspended or expelled (or if suspension or expulsion has been initiated) during the school year in which the application has been made.
- 4) If a minority balance of either the sending or receiving school would be negatively impacted.

Falsification of any data requested will result in immediate revocation/denial of transfer request.

It is the responsibility of the parent to provide transportation in accordance with Ohio Revised Code #3313.97(D). If transportation arrangements cannot be made by parent/guardian that insure regular, timely attendance, the child(ren) will be required to return to his/her home district school.

The prevailing rules and regulations of the Ohio High School Athletic Association shall apply to all students wishing to participate in Middle School or High School athletics.

In accordance with §3313.98 ORC, the Board will enroll students without differentiation on the basis of academic, athletic, artistic, or extra-curricular activity, nor proficiency in English. No person shall, on the basis of race, color, creed, national origin, sex or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program.

The Bowling Green School District will determine the number of transfer requests that can be accommodated. Factors that will affect the decision include, but are not necessarily limited to items mentioned above, the ability to accommodate transfers without the necessity of adding staff, and the number of neighborhood/ enrollment students who move into the district over the summer. The Superintendent shall notify parent/guardian if the child(ren)'s inter-district application has been approved or denied during the second week of August for elementary students and third week of July for secondary students. The final decision on all student placements rests with the Superintendent of Schools.

Revised 1/14

FOR STUDENTS WHO LIVE OUTSIDE BG SCHOOL DISTRICT

For School Year: _____/_____

Bowling Green City School District

INTER-DISTRICT ENROLLMENT for students living outside the BGCSD

ADMINISTRATIVE REGULATIONS/APPLICATION PROCESS [Please review guidelines on page 1.]

- 1. I, the parent/guardian, have read and understand that I must re-apply yearly for inter-district transfers (By June 10 for the following); and that if I do not re-apply, my child will return to and attend his/her home district school. Initial: _____
2. I, the parent/guardian, have read and understand that applying is not a guarantee for inter-district transfer and the application may be denied. Initial: _____
3. I, the parent/guardian, have read and understand that I am to provide proof of residence, i.e., utility billing, upon submitting this application form, in person, to the Office of the Superintendent. (Driver's license is NOT sufficient for this purpose.) This proof will be duplicated by office staff and attached to the application form. Initial: _____
4. I, the parent/guardian, have read and understand that I will be notified of the Board of Education decision during the second week of August for elementary students and third week of July for secondary students. Initial: _____

This is my child's: (check ONE)

- ___ First Year of Application for an Inter-District Enrollment for anticipated Grade _____ school year 20____ - 20____.
___ Yearly Re-Application for Inter-District Enrollment for anticipated Grade _____ school year 20____ - 20____.
___ Request to remain at current school due to moving out-of-district during the current school year 20____ - 20____ in Grade _____.

Student Name _____ Date of Birth _____
Social Security Number _____ Home School District/School of Residence: _____
School Student Attended LAST School Year _____

Inter-district Transfer Request for Alternate School: [] BG High School [] BG Middle School [] Elementary: ___Conneaut ___Crim
Comments/Rationale: _____ Kenwood

Please indicate if the student has ever received or is currently receiving special services, i.e., IEP, 504... in child's educational experience. Attach most current IEP and/or other pertinent documentation.

- [] Learning Disabled [] Developmental Handicap [] Multiple Handicap [] Emotionally Disturbed [] Speech Handicap
[] Title I Remedial [] Other (Specify, i.e., health, hearing, visual, 504 ...) _____

If no to the above, please indicate if any process for special needs services has been initiated for this student. ___ Yes ___ No

Has the student been expelled or suspended (or suspension / expulsion has been initiated) within the last 12-month period. ___ Yes ___ No

Parent(s)/Legal Guardian Name _____ Telephone # (Work) _____
HOME Address _____ Telephone # (Home) _____
PO Box _____ Apt. # _____ City State Zip _____

Parental/Guardian Signature indicates that he/she has read and understood all of the administrative regulations and application process and all information provided to the district is correct. Falsification of any data requested will result in immediate revocation/denial of this request.

Parent/Guardian Signature: _____ Date: _____

Office Use Only:
Date Student Inter-District Transfer Form Received in Superintendent's Office _____ By: _____
Confirmation that Parent/Guardian has read, understood, and initialed/signed form: Y N Proof of residence attached: Y N
Dispensation: [] Denied [] Approved for school year 20____-20____ [] Approved for remainder of current school year 20____-20____
School Assignment: _____ High School _____ Middle School _____ Conneaut _____ Crim _____ Kenwood
Official Signature: _____ Date: _____