

## **INTRA-DISTRICT (*living within BGSD*) TRANSFER STUDENTS for Bowling Green School District Elementary Students ADMINISTRATIVE REGULATIONS/APPLICATION PROCESS**

Parents/guardians of students residing within the Bowling Green City School District may request that their child(ren) attend an alternative school by submitting a written intra-district request form, **in person, from April 1-May 10 to the Office of the Superintendent** for *each* child. If your child(ren) has been previously approved to attend an alternative school, that student does not need to reapply. The superintendent, in accordance with state law and administrative regulations, reserves the right to return students to their attendance/enrollment area school.

**Applicant must provide proof of residence at this time, i.e., dated utility billing. (Driver's license is not sufficient for this purpose.) Also, it is the parent/guardian responsibility to notify the school of any change of address for the student that occurs during the school year.**

### **1. Who should apply?**

- Parent/guardian of children entering kindergarten and/or students currently in kindergarten through fifth grade attending a school of the attendance/enrollment area in which they reside may apply for an alternative elementary school for the next school year by completing the intra-district enrollment form during the open period between April 1-May 10.
- If a child(ren) is attending his/her neighborhood/enrollment area elementary school and **moves outside** of this neighborhood/ enrollment area mid-year and wishes to remain at this particular school, the parent/guardian must also request an intra-district transfer.

### **2. What are some of the reasons for denial of an intra-district application?**

- a. 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. (Students receiving special education services will continue to be assigned to schools where the services specified in the student's individualized education program are 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 intra-district enrollment planning purposes, a cap of eighteen (18) students per classroom will be in place.
  - 2) If a student enrolled or living in the attendance area of a school building would have to be displaced.
  - 3) If a student has been suspended or expelled (or expulsion or suspension 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.
- b. Falsification of any data requested will result in immediate revocation/denial of transfer request.
- c. If transportation arrangements cannot be made by parent/guardian that insures regular, timely attendance, the child(ren) will be returned to his/her neighborhood/enrollment school.

### **3. What about transportation?**

Transportation of approved students transferred to an alternate school **at parent/guardian request shall be the responsibility of the parent/guardian in accordance with Ohio Revised Code #3313.97 (D).**

### **4. When will the parents/guardians be notified if their child(ren)'s application has been approved?**

The 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 Section 2 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 intra-district application has been approved or denied **as soon as possible after the May 10 deadline, or as soon as possible if submission is due to a mid-school year move.** The final decision on all student placements rests with the Superintendent of Schools.

### **5. What if the student was approved last school year?**

Children who **currently** attend an alternative school (other than their attendance/enrollment area school) will remain at the alternative school with applicable transportation restrictions still in force. Please **DO NOT** complete an application form. As noted above, the Superintendent reserves the right to return students to their attendance/enrollment area school. All attempts will be made to keep your child(ren), who have been previously approved, at their present assignment.

FOR STUDENTS WHO LIVE INSIDE BG SCHOOL DISTRICT

For School Year: \_\_\_\_\_ / \_\_\_\_\_

INTRA-DISTRICT (living within BGSD) TRANSFER STUDENTS for Bowling Green School District Elementary Students ADMINISTRATIVE REGULATIONS/APPLICATION PROCESS

If your child's intra-district (elementary schools transfer within BGSD) request was previously approved prior to the start of the present school year, DO NOT complete this form. Your child will remain at elementary school assigned within parameters of guidelines on page 1.

I, the parent/guardian, have read and understand:

- 1. The open enrollment period is April 1 - May 10 and that applying is not a guarantee for intra-district transfer and the application may be denied. Initial: \_\_\_\_\_
2. This is a parental/guardian request for an alternate school; transportation is the parent/guardian responsibility in accordance with ORC 3313.97(D). I can insure regular, timely attendance for my child. Initial: \_\_\_\_\_
3. I am to provide proof of residence, i.e. dated 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 will be notified of the Superintendent's decision before the end of the school year, or as soon as possible if submission is due to a mid-school year move. Initial: \_\_\_\_\_

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_
Social Security Number \_\_\_\_\_ Neighborhood/Enrollment School of Residence \_\_\_\_\_
Student Currently Attending \_\_\_\_\_ School and is currently in Grade \_\_\_\_\_
Intra-district Transfer Request or Alternate School: First choice: \_\_\_\_\_ Second choice: \_\_\_\_\_ (For Next Year's Grade Level \_\_\_\_\_)
Comments/Rationale: \_\_\_\_\_

Please indicate if the student has ever 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, ...) \_\_\_\_\_

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

Please indicate if the student has been expelled or suspended (or expulsion or suspension 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
School Assignment: \_\_\_\_\_ Conneaut \_\_\_\_\_ Crim \_\_\_\_\_ Kenwood
Official Signature \_\_\_\_\_ Date \_\_\_\_\_