

## **2014-15 Inter-District Open Enrollment Administrative Regulations / Application Procedures**

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The West Branch Local Board of Education believes that students should, under certain prescribed circumstances, benefit from an inter-district open enrollment policy. Guidelines for the transfer of students from districts, based upon criteria established by the school's administration and in conjunction with recommendations from officials of the Ohio Department of Education, are listed below. These guidelines are intended to be consistent with Section 3319.98 of the Ohio Revised Code.

1. All application(s) for inter-district open enrollment for the 2014-15 school year must be submitted to the Superintendent's Office of the West Branch Local School District between April 15th and May 15th. Applications will be acted upon by June 15th.
2. All approved transfers are in effect for the 2014-15 school year only.
3. No inter-district transfer will be permitted if the enrollment of the grade level being requested at the receiving building exceeds the following:

K-4	24 per classroom
5-8	24 per classroom
9-12	Shall be established on a course by course basis
4. No student, once accepted, will be displaced should enrollment exceed the limits stated above during that school year. The administration will determine building assignment without guarantee that the building assignment (elementary) will prevail in subsequent years.
5. Enrollment in a special program (e.g., gifted, learning disabled, developmentally handicapped) will dictate which building a student must attend as units are placed in buildings according to space availability.
6. School districts are not required to institute any new special education programs to serve transfer students. In a special education setting, the Federal Government prescribes a specific student to teacher ratio which must not be exceeded. Resident students are given first priority. If a student is evaluated for placement in a special education program, representatives of the district of residence must be invited to participate in the placement meeting.
7. Students previously enrolled under open enrollment will be given first consideration. All new inter-district open enrollment applications will be on a first-come, first-served basis.
8. Applicants may be rejected if the racial balance of either the sending or the receiving school district would be negatively impacted.
9. The West Branch School District **will not** be responsible for the transportation of students from other districts under open enrollment.
10. The West Branch Local School District may deny enrollment to students who have been expelled or suspended for ten (10) or more consecutive days in the current term or the immediately preceding term.
11. **All applicants must be registered in their "district of residence" in order for their application to be considered.**

**WEST BRANCH LOCAL SCHOOLS**  
**Superintendent's Office**  
**14277 Main Street**  
**Beloit, OH 44609**  
**PH: (330)938-9324**  
**Fax: (330)938-6815**



**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Time Received: \_\_\_\_\_

**INTER-DISTRICT OPEN ENROLLMENT APPLICATION**  
**2014-15**

**APPLICATIONS MUST BE RECEIVED BY 4:00 P.M. ON MAY 15<sup>TH</sup>**

Student Name: \_\_\_\_\_  
(First) (MI) (Last)

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: \_\_\_\_\_  
(Home) (Work) (Cell)

Student's Date of Birth: \_\_\_\_\_ Grade Level for 2014-15: \_\_\_\_\_

Ethnicity: Is the student of Hispanic/Latino heritage?  Yes  No

Race: (choose all that apply)  Asian  Black, African-American  White  
 Native Hawaiian or Pacific Islander  American Indian or Alaskan

District of Residence: \_\_\_\_\_ County of Residence: \_\_\_\_\_

West Branch building requested for 2014-15: \_\_\_\_\_  
(First Choice) (Second Choice-Elementary only)

Did this student participate in West Branch Open Enrollment in 2013-14? Yes or No  
If yes, what building did they attend: \_\_\_\_\_

Did any siblings attend WB in 2013-14? Yes or No

Does this student have an IEP for special education? Yes or No  
If yes, what is the disability condition? \_\_\_\_\_

Does this student receive speech therapy services? Yes or No

Was this student suspended or expelled during the second semester of 2013-14? Yes or No

The above information is true and accurate. False or inaccurate information will void this application.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

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Approved: \_\_\_\_\_  
Assigned to: \_\_\_\_\_ at \_\_\_\_\_ for 2014-15 school year.  
(Grade) (Building)

Not Approved: \_\_\_\_\_  
Reason(s): \_\_\_\_\_

Signature of School Official: \_\_\_\_\_ Date: \_\_\_\_\_

No student shall be denied admission to the West Branch Local School District or to a particular course or instructional program or otherwise discriminated against for reasons of race, color, national origin, sex, handicap or any other basis of unlawful discrimination. Please direct questions regarding open enrollment to Dr. Scott R. Weingart, Superintendent.