



Student ID: _____ ES Initials: _____

Desired School: _____

Open Enrollment Application

School Year Applying for: **2023-2024** Application: NEW RENEW

NOTE: This application MUST be submitted to the Student Enrollment Center, 115 S. Ludlow Street, Dayton, OH 45402. Applications will NOT be accepted at the individual school buildings.

STUDENT INFORMATION

First Name: _____ Middle Name: _____ Last Name: _____

Student Address: _____ Gender: Male Female

City, State, Zip: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____ Alt. Phone: _____

Parent/Guardian(s): _____ Birthplace City: _____

Is student Hispanic/Latino?: Yes No Native Language: _____ Home Language: _____

Please continue by checking one or more options to indicate what you consider your student's race to be:

White American Indian/Alaska Native Black Asian Hawaiian or Other Pacific Islander

SCHOOL INFORMATION

Grade for 2022-2023 School Year: _____ School District of Residence: _____

Last School of Attendance: _____ Reason for Request: _____

Does student have sibling already attending Dayton Public Schools?: Yes No

Has student been expelled during the current or previous school term?: Yes No

Is your child enrolled in a special education program? Yes No

PARENT CERTIFICATION

I understand:

- Non-payment of fees may result in the termination of open enrollment
- If this open enrollment is permitted, the parent is responsible for the transportation of the student to/from the school.
- An open enrollment to another school may affect the student's eligibility to participate in sports. Athletic eligibility is to be determined by the Director of Athletics in conformity with regulations of the Ohio High School Athletic Association and Dayton City Schools.
- Open Enrollment applications can be denied based on space, behavior or attendance.
- I must renew my open enrollment application yearly.

Mad River and Fairborn Schools do not participate in Open Enrollment. Students who enroll in Dayton Public Schools from these districts will be charged tuition to attend DPS.

Signature of Parent/Guardian: _____ Date: _____

OFFICE USE ONLY

Date Form Received: _____ Assigned School: _____ Status: Approve Denied

School Start Date: _____ If Denied, reason: _____ SSID #: _____

Superintendent Signature: _____ Date: _____