



Moreland School District
2nd grade Open Enrollment Application 2012-2013

District Enrollment Center
1850 Fallbrook Avenue, San Jose 95130 Phone: 874-2927

Deadline: Return completed form to Enrollment Center
by March 30, 2012 at 3:00 PM

PLEASE PRINT OR TYPE ALL INFORMATION

Student Name: Last First Middle

Circle One: Male Female Student's Date of Birth (MM/DD/YYYY) Home Phone:

Parent/Guardian Name(s): Last First Daytime Phone
Last First Daytime Phone

Address: House Number & Street Name Apt/Unit City ZIPCode

RESIDENT SCHOOL: Your resident school is the school students in your neighborhood are scheduled to attend. Mark the box next to the name of your resident school:

- ANDERSON VILLAGE SCHOOL BAKER SCHOOL COUNTRY LANE SCHOOL
EASTERBROOK DISCOVERY SCHOOL PAYNE SCHOOL

REQUESTED SCHOOL: Mark only one box. Forms with multiple requests will not be honored. Submit only one form. If you submit a duplicate and/or additional form, only the initial form will be honored.

- ANDERSON SCHOOL COUNTRY LANE SCHOOL

PLEASE CHECK HERE IF YOUR CHILD HAS AN IEP.

PRIORITY CATEGORY: Priorities will determine the order in which students are assigned to schools. If the District receives more requests for a school than there is space available, a lottery will be held. Priority categories will be used to determine the order of the lottery draw. You will be notified if a lottery is required.

Mark your priority category below. Do not mark more than one box. If two boxes apply, choose the higher priority category.

Your priority category will be verified by Enrollment Center staff before any lottery is held.

- Third Priority: Siblings of students who reside in the district and who are currently attending the requested school, so that they may attend that school together Please list the sibling's name and current grade level below
Fifth Priority: Students who parents or legal guardians have the primary place of employment (full-time employment) at the requested school.
Sixth Priority: All students who are residents of the district but are not in any of the other priorities

For Third Priority Only. Sibling's First and Last Name: Current Grade:

Home to School transportation is the responsibility of the parent.

Parent/Guardian Signature: Date Signed:

District Used Only: Date & Time Received: By: Priority Verified By: