



# Moreland School District Kindergarten Open Enrollment Application 2012-13

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** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Home Phone:** \_\_\_\_\_  
*(MM/DD/YYYY)*

**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 VILLAGE SCHOOL
- EASTERBROOK DISCOVERY SCHOOL
- PAYNE 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.*

Only the following priorities apply to Kindergarten Open Enrollment. 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:** \_\_\_\_\_