



Limited Open Enrollment Application
Student Data Enrollment Information
For 2017 – 2018 School Year

Providing accurate and up-to-date information will enable us to evaluate your application quicker. When completed, please return this application and the supporting documents listed below to 1745 W. Grand, Haysville, KS 67060. If approved, you will be notified by the school accepting your student.

TO EXPEDITE APPLICATION PROCESS, PLEASE INCLUDE THE FOLLOWING DOCUMENTS:
1)Transcript 2)Discipline Records 3)Attendance Records 4) Standardized Test Scores
5)State Assessment Scores 6) AIMSWeb Scores 7) IEP & 504 Records (if applicable)

If requesting a specific school, which one? (You must realize this will be a space available option.)

Please state your reason for this specific school request:

(If In-District student numbers increase your student may be moved to a school with space available. The parent/guardian will be notified of this prior to relocating the student.)

Please understand that, according to state laws, we are unable to provide transportation outside our school district boundaries. You will be responsible for transporting your student to and from our school.

Student Information:

Date of Application:

Name (Last, First, M.I.)

Street Address: DOB Gender M or F

City/State/Zip

Primary Contact Phone Number: Student enrolling in grade:

Secondary Address (if different than above):

Secondary City/State/Zip

Has this student previously been tested for Special Education? Yes No

Does this student have a current IEP? Yes No

Does this student have a 504 Plan? Yes No

Siblings of this student already attending a Haysville School:

Name School Attending Grade

Name School Attending Grade

Name School Attending Grade

Name School Attending Grade

Siblings of this student who are also applying to attend a Haysville School:

Name School Currently Attending Grade

Name School Currently Attending Grade

Name School Currently Attending Grade

Name School Currently Attending Grade

Has this student previously attended school in the Haysville School District? Yes No

If yes, which school(s)? _____ Dates Attended? (mo/year) _____

Grade entered Kansas Schools? (mo/year): _____ Date entered District USD 261? (mo/year): _____

Did you participate in the Parents as Teachers program with this child in U.S.D. #261 or elsewhere for six months or more? Yes _____ No _____

Guardian Information: Please include both biological parents' contact information unless one or both parents no longer have rights

Primary's Name: _____ Relationship to Student: _____

Primary's Employer: _____ Employer's Phone: _____

Primary's Cell: _____ Primary's Home Phone: _____

Primary's Email Address: _____

Secondary's Name: _____ Relationship to Student: _____

Secondary's Employer: _____ Employer's Phone: _____

Secondary's Cell: _____ Secondary's Home Phone: _____

Secondary's Email Address: _____

Primary Residential Guardianship: (check, please):

- Both Parents Mom and Stepfather Mom Only Shared/Joint Custody
 Dad and Stepmother Dad Only Other _____

Additional Information (meds, health concerns, legal issues):

Student's Name

Date

As parent or guardian I understand:

If approved to attend Haysville Schools, yearly renewal is contingent on the following factors; parental cooperation, space available, attendance, grades and disciplinary record. Each Limited Open Enrollment student approved to enter Haysville Schools will be evaluated at the end of each year to determine if the student has met the expectations of USD 261. If those expectations have not been met the student may not be invited back the following year.

Signature of Person Completing This Form

Relationship to Student

Haysville USD 261 does not discriminate on the basis of race, color, national origin, sex, disability, military status or age in its programs and activities. The following person has been designated to handle inquiries regarding non-discrimination policies:

Dr. Michael Clagg, Assistant Superintendent for Human Resources
1745 West Grand, Haysville, KS
316.554.2206



**Limited Open Enrollment Application
Enrollment Suspension/Expulsion Questionnaire**

The safety of students is a priority for Haysville USD 261. In an effort to ensure a safe environment for everyone, we must check the status of each student who is applying for enrollment in our schools.

According to Kansas Statute 72-8907 regarding suspension and expulsion of pupils: **Refusal to admit suspended or expelled pupil authorized:** *A pupil who has been suspended or expelled from school by any school district may be refused admission to school in any other school district, regardless of residency, until such time as the period of suspension or expulsion has expired.*

Prior to admission to Haysville USD 261, it is required that information about suspension or expulsion from a previous school be disclosed. Please complete the following information.

Is your student **currently** under a suspension or expulsion from his/her previous school? Yes No

Has your student **ever been** suspended or expelled from a school: Yes No

Is your student **in process of being** suspended or expelled from his current school? Yes No

If you answered Yes to any of the above questions, please also provide the following information:

Which school did this occur and what year, OR which school is this now in process of occurring:

School _____ Year _____

School _____ Year _____

School _____ Year _____

Print Student Name: _____

Parent Signature _____ Date _____

Limited Open Enrollment
Request for Copy of Student Records*

Haysville USD 261
1745 W. Grand
Haysville, KS 67060
(316) 554-2200 – Phone (316) 554-2230 – Fax

***Please note that Limited Open Enrollment for Haysville USD 261 is an application process. The request for a copy of student records is simply one part of the process, but does not mean the student has been accepted; therefore, do not withdraw the student from your District until you receive an official Request for Records.**

Today's Date _____ Student applying for admission to grade: _____

Student Name _____ D.O.B. _____

Parent/Guardian of Student: _____

Parent/Guardian Signature: _____

Last School Attended: _____

Address/City/State/Zip _____

Phone _____ Fax _____

List Any Other Schools Attended This Year: _____

***Please send the following:**

- | | |
|--|--|
| _____ Transcript of Previous Grades | _____ Individual Education Program (IEP) (if applicable) |
| _____ Withdrawal Grades | _____ Psychological Testing |
| _____ Health Records | _____ Athletic or Other Physical |
| _____ Attendance Records | _____ Verification of Date of Birth |
| _____ Discipline Records | _____ Grade this year |
| _____ KSHSAA (Transfer of Eligibility) | _____ KIDS State Student ID # |
| _____ Test Scores | _____ 504 Records (if applicable) |
| (including Standardized, State Assessment
& AIMSWeb Scores) | |

I, the undersigned, do hereby request release of a copy and authorize *(name of agency or person)* _____
_____ to release to Haysville USD 261, 1745 W. Grand, Haysville, KS 67060 any
medical, psychological, school, social or special education information concerning the above named student. I
understand that the information thus obtained will be treated in a confidential manner.

Signature _____ Relationship to Student _____

Address/City/State/Zip _____

FOR OFFICE USE ONLY

THIS INFORMATION HAS BEEN REVIEWED BY THE FOLLOWING SCHOOLS:

CAMPUS: _____

HWMS: _____ **HMS:** _____

FREEMAN: _____ **NELSON:** _____ **OATVILLE:** _____

PRAIRIE: _____ **Rex:** _____ **RUTH CLARK:** _____

SELECTED _____

IF SELECTED, WHICH SCHOOL _____

DENIED _____

IF DENIED, EXPLANATION _____

NAME OF PERSON COMPLETING THIS FORM: _____

**Haysville USD 261
Marketing Questionnaire
2017 – 2018 School Year**

Haysville USD 261 Marketing Committee would greatly appreciate your help in gathering information to determine how parents/guardians made the decision to submit an application for Limited Open Enrollment in our school district. This survey sheet will be detached from your application, so your answers will completely anonymous when the data is compiled.

Please circle your answers:

Please indicate which marketing activities have you seen or heard.

*Radio ads? **Yes** **No** Which stations? KFDI (FM 101.3) KFH (Sports Radio – FM 98.7)
KZSN (The Bull – FM 102.1) KFBZ (The Buzz – FM 105.3)

*Limited Open Enrollment postcards mailed to your home from our district? **Yes** **No**

*Mall Banners and signs? **Town East** **Town West**
Which months? January – March June – August October - December

*Television ads? **Yes** **No**
Road To Success Begins In Haysville Commercials **Yes** **No**
Limited Open Enrollment Commercials **Yes** **No**

*Ads In Local publication? Splurge Vype Wichita Business Journal Wichita Eagle

Why do you want your child to attend Haysville Public Schools?

Which of our marketing activities influenced your choice of schools for your child for the 2016 – 2017 academic year?

Thank you for taking the time to fill our form.

Liz Hames, Community Relations Coordinator

Haysville USD 261

lhames@usd261.com