

OPTIONAL ENROLLMENT REQUEST FORM

MIDDLE (Grades 6-8)

School Year 2010-2011

Student ID. # \_\_\_\_\_  
Date Recd: \_\_\_\_\_  
Recd. By: \_\_\_\_\_

Directions:

- Please read all information before completing this form.
- The Student Registration Office will be responsible for all optional enrollment assignments.
- All assignments are subject to desegregation and capacity requirements. If demand exceeds supply, a lottery will be used to fill vacancies.
- Students who are not selected will have their names placed on a prioritized waiting list.

(PLEASE PRINT OR TYPE)

Check here if this is a **NEW** address/ if so  
Parent **MUST** process Change of Address Form

Student's Legal Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Parent's Work Phone: \_\_\_\_\_

Current School Assignment \_\_\_\_\_ Grade 2010-2011 \_\_\_\_\_

PARENTS MAY MAKE UP TO THREE (3) CHOICES FROM THE OPTIONS LISTED BELOW. RANK YOUR CHOICES IN NUMERICAL ORDER (1ST, 2ND, 3RD). YOU ARE NOT REQUIRED TO USE ALL OF YOUR CHOICES. STUDENTS MAY ALSO MAKE A COMBINATION OF CHOICES. EXAMPLE: 1<sup>ST</sup> CHOICE – MANN ARTS, 2<sup>ND</sup> CHOICE – DUNBAR, 3<sup>RD</sup> CHOICE – HENDERSON

**GRADES 6-8**

- \_\_\_\_\_ ☆ Cloverdale - Economics / Multimedia / Engineering
- \_\_\_\_\_ ☆ Dunbar International Studies / Gifted and Talented
- \_\_\_\_\_ ☆ Forest Heights International Baccalaureate Program
- \_\_\_\_\_ ☆ Henderson Health Science
- \_\_\_\_\_ ☆ Mabelvale – Environmental Sciences / Medical Sciences / Information Communications Technology
- \_\_\_\_\_ ★ Mann Arts
- \_\_\_\_\_ ★ Mann Science

☆ = Interdistrict Magnet Program

★ = Stipulation Magnet School

**NOTE:** THIS FORM IS TO BE USED FOR STUDENTS WHO RESIDE IN *LRSD ONLY*. STUDENTS WHO LIVE IN *PCSSD* OR *NLRSD* MUST APPLY THROUGH THEIR HOME DISTRICT.

*I understand that if I wish to withdraw this application for any reason, I may do so prior to the assignment of my child. I agree that if my request is approved, my child **MUST** remain in the program for a minimum of one (1) school semester.*

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

White Copy – Student Assignment Office

Yellow Copy - Parent