

**Initial Application for Admission of Out-of-District Students  
Weld County School District Re-3(J)**

**Parent Information:** Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**School Year Requested:** 20\_\_\_\_ - 20\_\_\_\_

I request that my child be permitted to attend Weld County School District Re-3(J) for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

**Child:**

Student Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Grade \_\_\_\_\_

Resident School District: \_\_\_\_\_ Last School Attended: \_\_\_\_\_

The following documents must be provided upon Initial Application: Transcript / Report Card, Attendance Records, Behavior /Discipline Records.

Does the student have an IEP or 504 Plan? \_\_\_\_\_ (if yes, please provide records)

***Re-3J Staff will contact previous schools to verify student information.***

***Please allow a minimum of 3 days for administration to process this application request.***

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I, the parent, understand that: bus privileges will be granted provided room remains available; and I am responsible to be at the approved bus stop at the scheduled time for pick-up and drop-off. (All parties involved must sign below.) Attendance is granted only for the current year. An application for Re-admission must be completed by **May 15<sup>th</sup>** for continuation of attendance in the following school year.

*Students may be denied admission for any of the following reasons as established by district policy: expulsion from previous school/program, participation would require alterations to the structure of the school/facilities, there is a lack of space or teaching staff, the school does not offer appropriate programs or is not equipped to meet the special needs of the student, the school does not offer a program requested by the student, the student does not meet other established eligibility, a desegregation plan is in effect, a poor attendance record exists, a poor disciplinary record exists, a poor academic record exists, a poor attitude toward school exists, and/or any other reason which may affect the student's attendance or performance as determined by administration. If information is revealed subsequent to enrollment, admission may be revoked at any time.*

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

***After completing and signing this form, please return it to the main office of the school you wish to attend along with the required documents.***

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Date application and supplemental materials reviewed and previous school references checked: \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Approval/Denial (circle one) Date: \_\_\_\_\_

Superintendent Signature: \_\_\_\_\_ Approval/Denial (circle one) Date: \_\_\_\_\_

*\*Written justification must be attached to this form if the administration recommends that the Board of Education deny this request.*

Board: Approval \_\_\_\_\_ Denial \_\_\_\_\_ Date \_\_\_\_\_