



Mobile Elementary School District No 86

“Partnership in Learning for ALL”

42798 South 99th Ave * Maricopa AZ 85139 * Phone 520-568-2280 * Fax 520-568-9361

**OPEN ENROLLMENT
Attendance Application**

File this application at the school district office

Student’s name _____
Last First M.I.

Current grade _____ Birth date _____ Home phone _____

Work phone _____ Cell phone _____

Parent’s name _____
Last First M.I.

Home address _____
Street City Zip

The above-name student: resides outside the School District; or
 resides within the School District

Present school of attendance

School _____ District _____

City _____ County _____

Request assignment to _____ School

Is the above-named student:

- Yes No Expelled or long-term suspended from any school or school district?
- Yes No Currently subject to expulsion or long-term suspension from a school or school district?
- Yes No N/A In compliance with conditions imposed by a juvenile court?
- Yes No N/A In compliance with a condition of disciplinary action in any school or school district?

Note: The following conditions apply to the open-enrollment program:

1. An attendance application must be completed and submitted on or before April 15.
2. Enrollment is subject to the capacity limit established for the school and/or its grade levels.

3. On or before June 1, the parent or legal guardian will be notified in writing whether the application has been accepted, rejected, or placed on a waiting list.
4. Transportation for the student may be the responsibility of the parent or legal guardian.
5. Providing false information on this form may result in the application being denied or admission being revoked.

The signatory affirms that the student will abide by the rules, standards, and policies of the school and the District if enrolled.

Signature of Parent or Legal Guardian

Date

FOR DISTRICT USE ONLY ♦ DO NOT WRITE BELOW THIS LINE

Student number _____ **Date stamp** _____
Filing Date

Accepted Placed on waiting list District Administrator _____
Signature Date

Rejected – Reason for rejection _____

Copies sent by school to applicant and District office.

Date sent _____