

POJOAQUE VALLEY SCHOOL DISTRICT

Open Enrollment Application

Applications will be accepted from February 12, 2018, through March 9, 2018, for the 2018-2019 School Year.

Complete and return this form to the PVSD Central Office at 1574 State Road 502, Santa Fe, NM 87506.

SCHOOL AND GRADE REQUESTED FOR THE FALL 2018 (Please Circle):

PRES: K 1 2 3

PVIS: 4 5

SGA: 6

PVMS: 7 8

PVHS: 9 10 11 12

Student's Name: _____ Date of Birth: _____ Home Phone #: _____

Parent/Legal Guardian: _____ Cell Phone #: _____ Email: _____

Home Address: _____

Mailing Address: _____

Employer: _____ Employer Phone #: _____

*Was this student enrolled in the Pojoaque Valley Public Schools before? Yes _____ No _____

* If yes, date of previous enrollment: _____ and give reason for leaving: _____

*Has your child been expelled from any public or private school within the preceding 12 months? Yes _____ No _____

*Has your child exhibited behaviors in the previous school in the last 12 months that are considered disruptive or detrimental to the safety and/or welfare of students or personnel? Yes _____ No _____

*What special learning needs does your child have?

English as a Second Language (ESL) _____ Special Education (SPED) _____

Title I Reading _____ Title I Math _____ Section 504 Medical _____

Counseling _____ Other learning needs: _____

*Name of school currently attending _____

I would like to apply to the Pojoaque Valley School District as a:

_____ Second priority student who was enrolled in a school ranked as a school that is in need of improvement or graded by the New Mexico Public Education Department as a "D" or "F" school.

_____ Third priority student who (select all that apply):

- _____ Children of PVS employees;
- _____ Siblings of students already attending PVS
- _____ Extreme hardship
- _____ Student safety

_____ Fourth priority student if there is space or program availability

By signing below, I am certifying that I have read the PVSD Open Enrollment Policy and understand that approval will depend on priority level and space availability. I am also certifying that the information on this application is true and correct. I am aware that falsifying information could lead to immediate disenrollment.

Parent/Guardian Signature: _____ Date: _____

Date Application Received: _____

Received by: _____