

ATTACHMENT 1

***APPLICATION FOR TRANSFER TO A NONRESIDENT SCHOOL
OR SCHOOL DISTRICT UNDER THE ARKANSAS OPPORTUNITY
PUBLIC SCHOOL CHOICE ACT***

APPLICANT INFORMATION

Student Name:

Student Date of Birth:

Gender

Male

Female

Grade:

Does the applicant require special needs or programs? Yes No

Is applicant currently under expulsion? Yes No

ETHNIC ORIGIN (CHECK ONE)

(For data reporting purposes only)

2 or More Races

Asian

African-American

Hispanic

Native American/
Native Alaskan

Native Hawaiian/
Pacific Islander

White

RESIDENT SCHOOL AND SCHOOL DISTRICT OF APPLICANT

District and School Name:

County Name:

Address:

Phone:

NONRESIDENT SCHOOL/SCHOOL DISTRICT APPLICANT WISHES TO ATTEND

District and School Name:

County Name:

Address:

Phone:

ATTACHMENT 1

PARENT OR GUARDIAN INFORMATION			
Name:		Home Phone:	
Address:		Work Phone:	
Parent/Guardian Signature		Date:	
<p><u>Note 1:</u> The race or ethnicity of a student shall not be used to deny the student to attend a school district of choice under the Arkansas Opportunity School Choice Act. This information is gathered for district reporting purposes only.</p> <p><u>Note 2:</u> Pursuant to Ark. Code Ann. § 6-18-227, reviewers of this application are hereby notified that a transfer under the Arkansas Opportunity School Choice Act shall operate as an irrevocable election for each subsequent entire school year and shall remain in force until the student completes high school or as otherwise provided by law.</p> <p><u>Note 3:</u> A school district shall not deny a student the ability to attend school in the student's school district of choice unless there is a lack of capacity at the school in the student's school district of choice as defined by Arkansas law and Arkansas Department of Education rules.</p> <p><u>Note 4:</u> Pursuant to Ark. Code Ann. § 6-18-227, a student may only transfer from a public school or school district that has been classified as a public school or school district in academic distress.</p>			
DISTRICT USE ONLY			
Date and Time Received by Nonresident District:			
Resident District LEA #:		Nonresident District LEA#:	
Resident School LEA#:		Nonresident School LEA#:	
Student's State Identification #:			
Application	Accepted	Rejected	
Reason for Rejection (If Applicable):			
Date Notification Sent to Parent/Guardian of Applicant:			