FELICITY-FRANKLIN LOCAL SCHOOL DISTRICT

105 Market Street P.O. Box 619 Felicity, Ohio 45120 INTER-DISTRICT ENROLLMENT APPLICATION GRADES K-12 OPEN ENROLLMENT APPLICATION 2024-2025

Open Enrollment Must Be Renewed Annually

Name of Student:	Date of Birth	SSN#	
Parent/Guardian's Name**Please provide court documents if applicable		Phone No	
Cell Phone No	Alternate Phone No		
Address:	Email Address:		
City	State	Zip Code	
District of Residence:			
Was your enrollment application approved last year	??Yes _	No	
Grade Level of Student in 2023-2024	Grade Level of St	udent in 2024-202	5
Is student enrolled in Special Education (IEP) or Tut	torial Programs?	Yes	No
If Yes, Explain:			
Has the student been Suspended or Expelled during If yes, please explain: Total number of day's student missed during the las If student will be in Grades 9-12, list all courses requ	t school year?		•
12 45		3	
45		6	
Parent/Guardian Signature Knowingly falsifying this document is a violation of the Degree Misdemeanor punishable by a prison term of some be billed (and prosecuted in court, if necessary) to colinformation will result in immediate withdrawal of your PLEASE SUBMIT TO THE SUPE	six (6) months and/or a fir llect all back tuition which our child(ren) from the Fe <mark>RINTENDENT'S OFFICE</mark>	tion 2921.13 (A) (6) ne up to \$1000.00. j may be due. Inacco licity-Franklin Loca <mark>BY APRIL 30, 202</mark>	urther the affiant will urate and /or false I School District. <mark>4.</mark>
Received By:Date:_ Application ApprovedDenie			
Reason(s):			
Signature of Official:		Date:	
No student shall be denied admission to the Felicity-Finstructional program or otherwise be discriminated any other basis of unlawful discrimination.			

Adopted: March 15, 2004