

For Office Use Only:
(MUST be completed by
Attendance Specialist before
processing)
Date Received: _____
Residential Transfer: Y / N
Out of District: Y / N
In District Student ID
Number:

Gilbert Public Schools
Open Enrollment Application

Applications Will be Accepted Starting 1st Business Day in November

School Requested: _____ School Year Applying For: _____
Grade Level Applying For: _____ Date of Birth: _____
Student's Name: _____
Current School: _____ Current District: _____
Parent's Name: _____ Home Phone: _____
Home Address: (include full address including the street, city, zip code)

Email Address: _____
Reason for seeking admission: (If applicable, attach more information)

Is either parent a Gilbert Public Schools employee: ___ Yes ___ No
Location: _____ Position: _____
Siblings currently attending this school:
_____ Grade: _____
_____ Grade: _____
_____ Grade: _____
Programs student currently participates in:
___ Gifted/Talented (attach any gifted testing scores if applicable)
___ ELL
___ Section 504 (If not a current GPS student, must attach paperwork)
___ Special Education (If not a current GPS student, must attach current IEP)

Is the student on or being considered for a long-term suspension (11+ days) or expulsion? ___Yes___No

Is the student under a condition imposed by court pursuant to A.R.S. 8-301? ___Yes ___No

-If yes, is the student in compliance with condition? ___Yes ___No

Is the student identified and receiving services under the McKinney-Vento Act?___Yes___No

Previous school(s) the student has attended:

Name of School(s)	Year(s) Attended	Address	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____

Signing this application affirms the following:

1. Transportation will NOT be provided by the district except as set forth in A.R.S. 15-816.
2. The student must agree to follow all rules and regulations of the receiving school, including standards for homework, student conduct and attendance.
3. Grades 9-12 Only- Eligibility for athletics and extracurricular activity is affected when students transfer from one school to another. Students considering a possible transfer must contact the Athletic Director of the receiving school to determine eligibility prior to transferring.
4. This form will be used to access information from former school districts (i.e. discipline, attendance, grades)
5. Proof of custody has been provided, if applicable.
6. Acceptance is on a yearly basis. While reapplication is not required, continuing status and acceptance will be reviewed annually.

Providing false information on this form may result in the application being denied or admission being revoked.

Parent Signature

Date

Student Signature

Date

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____Approved

____Denied

____Waiting List

Principal's Signature: _____ Date: _____

Rev 08/13/2019