

order of preference (add more preferences if desired).

General Statewide Enrollment Options Application for K-12 and Early Childhood Special Education

Section 1: To be Completed by One or Both of the Student's Parents or Legal Guardians

The General Statewide Enrollment Options Application for K-12 and Early Childhood Special Education is the required application for all Minnesota school districts. Please use this application for inter-district K-12 open enrollment and inter-district enrollment in Early Childhood Special Education (ECSE). Please use the Statewide Enrollment Options Application for State-funded Voluntary Pre-Kindergarten and School Readiness Plus for voluntary pre-kindergarten or school readiness plus open enrollment.

IMPORTANT NOTE: Do not disclose other information to the non-resident district until a seat is offered in writing. At that point, the district will request information such as special needs, birth date, race, ethnicity, academic and other records.

Student Information Student Last Name: ____ First: ___ Full Middle: Will the student be at least age 5 and under age 21 by September 1 of the enrollment year or be applying for ECSE? Yes No* *If No, please read information in the Statewide Enrollment Options Instructions before proceeding. Student's current grade level (If applying for ECSE, write EC): __________ Grade Level Desired: _____ **Student Resident District Information** Resident District Name: District Number: _____ City: _____ District of Choice (non-resident school district) District of Choice Name: ___ District Number: _____ City: ___ Identify the reason for the request to enroll in a nonresident district: **School Site or Program Preferences**

If the non-resident school district has multiple school sites/programs that serve your child's needs, you may rank sites/programs in

2			
3			
Enroll	ment Timeline		
When	are you seeking to enroll your child?		
	Immediately Not immediately, but sometime during	g the current school year	
	Next school year.		
Please	Employee child preference: Student har resident district. Family move: The student's Minnesota deadlines. Student is a resident of City of Edina be Student seeks enrollment in Edina Pub Student is requesting a move into and, deadlines. You can check here if you de Student is currently expelled under Mi	/or a move out of a district that receives Achievems o not know the answer to this: innesota Statutes 2022, section 121A.45 for a reasonallows but does not require the non-resident distri	dent who is an employee of the non- o the school year requested, waiving na home is not Edina Public Schools. ent and Integration Revenue, waiving on listed in Minnesota Statutes 2012,
Last Name:		First Name:	MI:
Home Phone:		Work Phone:	
Cell Phone:		E-mail:	
Street	: Address:		
		State:	
Paren	t/Guardian 2:		
Last N	lame:	First Name:	MI:
Home Phone:		Work Phone:	
Cell Phone:		E-mail:	
Street	: Address:		
City:			

Physical or Electronic Signature of at Least One Parent/Legal Guardian is Required

I hereby verify that the above information is true and correct to the best of my knowledge.

Signat	ture of parent/legal guardian 1:			
Date:				
Signat	ture of parent/legal guardian 2 (optional):			
Date:				
Subm	nission Information			
Janua	riority consideration, please complete this application and send it to the Superintendent's Office in the <u>nonresident District</u> by ary 15 before the first fall enrollment. Please do not send this application to the Minnesota Department of Education. Use one cation per student per requested district.			
distri	cations received by the non-resident district after the January 15 deadline may qualify for exceptions to deadline or, if not, cts may voluntarily agree to allow enrollment through a voluntary <u>School District Non-resident Agreement for Inter-district Iment</u> .			
Section	on 2: To be Completed by the Non-resident District			
days a must	resident District: Notify parents/guardians of application approval or disapproval in writing by February 15 or no more than 90 after receiving applications that come later through an Achievement and Integration School Choice Program If rejected, you let families know legal reason for denial. Reminder: ECSE open enrollment applications cannot be denied solely due to lack of city to provide special education services. (See Minn. Stat. section 124D.03, subd. 6 [2022]).			
Pleas	e expedite any requests for open enrollment into Early Childhood Special Education Services.			
appro days a applio	ies must accept or decline the offer by March 1 or 10 business days after notification that their application has been oved. After receiving the commitment to attend, the non-resident district must notify the resident district by March 15 (or 30 after initial receipt if form filed after January 15) of the student's intent to enroll. Districts must report all counts of rejected cations and reasons to the Minnesota Department of Education by July 15 or each year. Application Submitted:			
Distri	ct Name: Northfield Public Schools District Number: 0659-01			
Distri	ct Contact Name: Matt Hillmann			
Title:	Superintendent			
	e: 507-663-0629 Email Address: mhillmann@northfieldschools.org			
	the January 15 deadline apply?			
	Yes, the deadline applies and it was met.			
	Yes, but it was not met. If this is the case, contact the superintendent's office in the resident district immediately regarding Section 3 of this form to determine whether the resident district and your district will agree to a Nonresident Agreement to serve the student prior to open enrollment becoming available.			
	No, one or both districts receive Achievement and Integration funding from MDE.			
	No, family moved to resident district on December 1 or later.			
	No, the commissioner of education and commissioner of human rights have determined the resident district's policies, procedures or practices are in violation of Title IV of the Civil Rights Act (Minn. Stat. section 124D.03, subd.7 [2022]).			
Will t	he student have priority in a lottery? No 🔲 Yes, based on:			
	Sibling of currently open-enrolled student in this district.			
	MDE-approved Achievement and Integration with specific school choice plan involving the districts.			
	City of Edina resident who is a district employee.			
	City of Edina resident whose resident school district is not Edina Public Schools, seeking entry to the district.			

Appro	oval/Disapproval of Open Enrollment Application	on
	APPROVED	
		EEMENT for upcoming year that is mutually agreed upon by both districts.
	level in the first fall enrollment or the grade le	as open enrollment provided that a lottery is not needed for the student's grade vel has not been closed by board action.
	Students will be entered into lottery if one is h document agreement using Section 3 or another	reld. (Non-resident district: keep documentation of the agreement. Districts manner format of their choosing.)
	ENT'S ASSIGNED SCHOOL SITE/PROGRAM: On ct policies and procedures, the above student w	the basis of information provided in the above application, and with respect to ill be assigned to:
Schoo	ol Building Name:	
Starti	ng Date:	Grade Level:
J.cai cii		
	NOT APPROVED	
	The non-resident district has denied the reque	est for open enrollment because of the following reason(s) allowed in Minnesota
	Statutes 2022, section 124D.03. Reminder: ECS program capacity. Check all that apply:	SE open enrollment applications cannot be denied based on special education
		net; situations that would have waived the deadline are not present. See
	·	Minnesota Statutes 2022, section 124D.03, subdivision 3.
	•	r open enrollment. (Minn. Stat. 2022 section 124D.03, subd.2)
	· · · · · · · · · · · · · · · · · · ·	Minn. Stat. 2022 section 124D.03, subd. 2 and subd.6)
	District has denied the application because of (https://www.revisor.mn.gov/statutes/2012/ci	·
NOTIF	FICATION TO RESIDENT DISTRICT	
	•	ast district of attendance by March 15 or 30 days later of the pupil's intent to
	in the non-resident district. The same proceduct to another participating non-resident district.	res apply to a pupil who applies to transfer from one participating non-resident
Name	of Superintendent/Responsible Authority:	
Signa	ture:	Date:

Please Note: districts may not modify this form, add data fields or create alternative formats.