

Please Print

OPEN ENROLLMENT REQUEST FOR ATTENDANCE

Inter- and Intra-County Residents

Student's Full Name:		_Grade:	Age:
Parent/Guardian's Name:			
Physical Address:	Home Phone:	()	
Mailing Address:	Work Phone:	()	
County of Residence: Current S	chool:		
Request Transfer to: Name of School			
Reason for Request:			
Is student receiving special education services? \square No	Yes		
Has been expelled from school? □No □Yes Date Expelled	:/		
Has student committed a Level III or IV violation in the last 3	65 days? \square No	Yes	
Is the student currently enrolled in alternative education?	□ No □ Yes		
As per State Laws of West Virginia, 18-5-16a, both County Boards of Education must approximate this transfer if the student/teacher ratio allowed by West Virginia code is exceeded (last child	ve transfers of non-resident st d will be transferred).	udents. It may bed	ome necessary to rescind
Parent/Guardian Signature:		Date:	//
After form is complete and all signatures have been obtained, mail all copie	es of this form to the ad	dress listed abo	ove.
NOTE: To be used by Citizens, Students or Employees DISCRIMINATION PROHIBITED: As required by federal laws & regulations, the Wetzel County Board handicapping condition, or national origin in employment or in its educational program and activities. Board of Education at 333 Foundry Street, New Martinsville, WV 26155; Phone: 304-455-2441 Ext. 118 at 333 Foundry Street, New Martinsville WV 26155; Phone: 304-455-2441 Ext. 183; or to the Department	Inquiries may be referred to Too B; to Laura McLaughlin, Section 50	ld E. Barcus, Title IX 04 Coordinator, Wetz	Coordinator, Wetzel County el County Board of Education
For INTRA-COUNTY Residents, conferences must be held of	and signatures obtai	ned from bo	th the
principal in the attendance area in which you reside and the	principal of the req	uested schoo	1
			ι.
Principal in the attendance area in which you reside So	chool	Date	
	chool	Date Date	
	chool		
Principal of requested school Approved by Wetzel County Special Education Director/504 C	chool	Date	
Principal of requested school So	chool	Date	
Principal of requested school Approved by Wetzel County Special Education Director/504 C	chool oordinator	Date Yes	
Principal of requested school Approved by Wetzel County Special Education Director/504 C Superintendent's Signature Date	chool oordinator No NTER-COUNTY resid	Date Yes	
Principal of requested school Approved by Wetzel County Special Education Director/504 C Superintendent's Signature Date Wetzel County Board of Education meeting date (for III	chool oordinator No NTER-COUNTY resid	Date Yes	