



DANBURY LOCAL SCHOOLS

9451 EAST HARBOR ROAD, LAKESIDE-MARBLEHEAD, OHIO 43440
WWW.DANBURYSCHOOLS.ORG T:419.798.5185 F:419.798.2260

OPEN ENROLLMENT NOTIFICATION - 2018-2019 Inter-District Open Enrollment Application

Today's Date _____

Student's Full Name: _____ Date of Birth _____ Male Female

Custodial Parent/Legal Guardian Name: _____

Street Address: _____

City, State, Zip: _____

Phone number: _____

Present school district of **residence**: _____

School building **presently attending**: _____

Grade level of student for the 18/19 school year: _____

Is student presently enrolled in special education or tutorial programs? Yes _____ No _____

(Please specify) _____

Was the student suspended for 10 or more days during the previous school year? Yes ___ No ___

Custodial Parent/Legal Guardian Signature: _____ Date: _____

RETURN APPLICATION TO: DANBURY LOCAL SCHOOLS, 9451 E. HARBOR RD, MARBLEHEAD, OH 43440

The Superintendent will consider on an individual basis any applications submitted. Emphasis for approval will be placed on the optimum number allowed.



For office use only:

Date: _____

Approved: _____ Rejected: _____

Signature of Official: _____

Reason(s): _____