

APPLICATION DEADLINE: MARCH 27, 2020

SCHOOL SELECTION APPLICATION – SOUTH ZONE ELEMENTARY SCHOOLS

For students entering Kindergarten in September 2020

A) Student Information (Please use one application per child)

Last name First name Middle initial

Student ID # _____
(Will be assigned by Student Placement)

Male Female

Date of Birth: ____ / ____ / ____
MONTH DAY YEAR

Federal Ethnic Category? Hispanic or Latino American Indian or Alaska Native Black or African American
 White Native Hawaiian/ or Other Pacific Islander Asian

Does student currently have an Individualized Education Plan (IEP)? Yes No

B) Parent/Guardian Information

Last name of Parent/Guardian First name Middle initial

Relationship to student Address Zip

Home phone Work phone Cell phone Email

Last name of other Parent/Guardian (Optional) First name Middle initial

Relationship to student Address Zip

Home phone Work phone Cell phone Email

Please complete side 2 →

PLEASE DO NOT MAIL THIS APPLICATION.

*Please bring this application and registration materials to the Office of Student Placement
located at RCSD Central Office, 131 West Broad Street.*

C) Choosing Your School

Step 1

If your first choice school is a Citywide school, select one now.
If your first choice is a neighborhood school, do not select a Citywide school, go to step 2.

Step 2

Rank your choices of neighborhood (South Zone) schools from 1 to 4 with 1 being your 1st preference. If you selected a citywide school, you must also rank 4 neighborhood schools.

CITYWIDE SCHOOLS:
(Select one only)

- ___ Dual Language at School No. 12
- ___ School No. 10
- ___ School No. 15
- ___ School No. 58
- ___ Montessori Academy (School No. 53)
- ___ Wilson Foundation Academy (No. 68)

SOUTH ZONE:

(Rank your choices from "1" to "4," with "1" being your first choice.)

- ___ School No. 2
- ___ School No. 3
- ___ School No. 4
- ___ School No. 12
- ___ School No. 16
- ___ School No. 19
- ___ School No. 23
- ___ School No. 29
- ___ School No. 35

My child has a brother/sister who currently attends our first-choice school and will attend that school in 2020-21.

Older child's name: _____

Date of Birth: _____

Current grade: _____

ID# _____

School: _____

My child attends a Pre-K 4-year-old program in our zone at:

D) Parent Signature

I have reviewed the information in the school selection booklet for my zone and have completed this application indicating my choices for my child's school for the 2020-21 school year.

I understand that my child will be placed through the school choice lottery process based on space available in the schools selected on this application. If my child does not receive the first-choice school, he or she will be placed on a waiting list for that school and assigned to the 2nd, 3rd, or 4th choice school, based on availability. Waiting lists are maintained until October 1st.

I understand that priority is given as follows:

- My child's first choice school is the same citywide school or a school in my zone that an older sibling will attend in 2020-21.
- My child lives within a half mile of my home school in my zone.
- My child attends Preschool at a school in my zone.

I understand that these priorities are only guaranteed for applications submitted on or before Friday, March 27, 2020.

Parent Signature _____ Date _____