

APPLICATION DEADLINE: MARCH 3, 2017

**SCHOOL SELECTION APPLICATION – NORTHWEST ZONE
ELEMENTARY SCHOOLS**

For students entering Kindergarten in September 2017

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

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 (Northwest Zone) schools from 1 to 4 with 1 being the first choice. If you selected a citywide school, you must also rank 4 neighborhood schools.

CITYWIDE SCHOOLS:

(Select one only)

- ___ School No. 10
- ___ School No. 15
- ___ School No. 20
- ___ School No. 54
- ___ School No. 57
- ___ School No. 58
- ___ Montessori Academy (School No. 53)
- ___ Wilson Foundation Academy (68)
- ___ Dual Language Program at School No. 17

NORTHWEST ZONE:

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

- ___ School No. 5
- ___ School No. 7
- ___ School No. 17
- ___ School No. 34
- ___ School No. 41
- ___ School No. 42
- ___ School No. 43

My child has a brother/sister who currently attends our first-choice school and will attend that school in 2017-18.

Older child's name: _____

Date of Birth: _____

Current grade: _____

ID# _____

School: _____

My child attends Pre-K 4-year-old program 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 2017-18 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 2017-18.
- 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 3, 2017.

Parent Signature _____ Date _____