

APPLICATION FOR ADMISSION
TO
NORTH RIVER SCHOOL DISTRICT #200

Section 1. (To be completed by Applicant/Parent)

Date _____

Student Name _____ Age _____ Grade _____

Address _____

City _____ State _____ Ph.# _____

Resident School District _____

(Signed Release from Resident District Must Be Attached)

NOTE: Records Must Be Transferred Before Enrollment Can Be Approved

Reason for Requesting Admission:

Previous Schools Attended: (most recent first)

| School | From | To | Reason For Leaving |
|--------|-------|-------|--------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

I understand that failure to disclose information regarding reasons for withdrawal from a previous school or falsifying information related to this application will constitute adequate reasons for denied enrollment of the involved student at North River.

Signature of Parent or Legally Designated Guardian _____

Section 1. (To be completed by the Superintendent, North River Schools)

In receipt of: a) Release Resident School District _____ Date _____

b) Records From School of Most Recent Attendance _____ Date _____

c) Action: Approved For Enrollment _____ Date _____
Disapproved For Enrollment _____ Date _____

Comments: _____

Superintendent, North River _____ Date _____

APPLICATION FOR ADMISSION
TO
NORTH RIVER SCHOOL DISTRICT #200

3140F

Section 1 (To Be Completed By Applicant)

Date _____
Student Name _____ Age _____ Grade _____
Address _____
City _____ State _____

Resident School District _____
(Release from resident district must be attached)

Note: All Records Must be Available for Transfer

Reason for requesting admission:

Previous schools attended: (most recent first)

| School | From | To | Reason for Leaving |
|--------|-------|-------|--------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Signature of Parent or Guardian _____ Date _____

Section 2 (action on application)

Approved: _____ Date _____
Disapproved: _____ Reason for Action _____

