



Fort Frye Local Schools Inter-District Open Enrollment Application

510 Fifth St. P.O. Box 1149 Beverly, Ohio 45715 Phone: 740-984-2497 Fax: 740-984-8784

2020-2021 School Year

NOTE: This application MUST be returned to the building principal by June 1st.

Date: _____

Name of Student: _____

Resident School District of Student: _____

Previous School Attended: _____

Fort Frye School Requested: (First Choice) Fort Frye High School Beverly-Center Elementary Lowell Elementary Salem-Liberty Elementary

Fort Frye School Requested: (Second Choice) if any Beverly-Center Elementary Lowell Elementary Salem-Liberty Elementary

Grade level of student for the coming school year: _____

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

If yes please explain: _____

Name of Parent/Guardian: _____

PHYSICAL Address: _____ City: _____ Zip: _____

MAILING Address: _____ City: _____ Zip: _____

Home Phone Number: _____ Work Phone Number: _____ Cell Phone Number: _____

> When applying for inter-district open enrollment, students **MUST** be registered at their school district of residence. **Applications for inter-district transfer must be submitted annually to the building principals by June 1st.** Applications will be acted upon by June 15th. Parent/Guardian will be notified by mail on or before June 30th. *One application must be submitted for each student who requests an inter-district transfer.*

I hereby authorize school records of the above-named student to be transferred to Fort Frye Local School District:

Parent/Guardian Signature: _____ Date: _____

The Section Below for Office Use Only

Date Received: _____ Time Received: _____

Approved Denied Reason (s): _____

Principal Signature: _____ Date: _____

Superintendent Signature: _____ Date: _____