

**EDMOND PUBLIC SCHOOLS
NEIGHBORHOOD APPLICATION FOR
OPEN ENROLLMENT AT
CLEGERN ELEMENTARY SCHOOL
FOR THE SCHOOL YEAR 2023-2024**

Residency Verification	
<input type="checkbox"/>	ID
<input type="checkbox"/>	Deed/Rental Agreement

Date Received: _____
(For Office Use Only)

Applications for neighborhood placement accepted from January 17th – January 20th between 8:00 am – 4:00 pm, Tuesday through Friday. Proof of Residency is required. Preference will not be given based on date and/or time the application is received.

INFORMATION ABOUT STUDENT		
Student Name _____		
Last	First	M.I.
Male _____	Female _____	Grade (2023-2024) _____
Birthdate _____		
Address _____		
Number	Street	City
		Zip
Parent(s)/Legal Guardian(s): _____ _____		
Phone: _____	_____	_____
Home Phone	Guardian #1 Cell Phone	Guardian #1 Work Phone
	_____	_____
	Guardian #2 Cell Phone	Guardian #2 Work Phone
Primary email: _____		
Student's Neighborhood School: _____		
School Currently Attending: _____		
ADDITIONAL INFORMATION		
Does your student receive any of these services? Speech Therapy _____ IEP _____		
OT/PT _____ ELL _____ 504 _____ Gifted/Talented _____		
Name Of Siblings – (A separate application must be completed for each child)		
_____	_____	_____
Name	Birthdate	Grade 2023-2024
_____	_____	_____
Name	Birthdate	Grade 2023-2024
I understand that this placement, if granted, will be subject to conditions noted upon being granted. I further understand that:		
(1) I am responsible to furnish the necessary transportation or student(s) will walk to and from school.		
(2) Student(s) placement will cease if residence changes from Clegern boundaries.		
_____	_____	_____
Parent/Legal Guardian Signature	Relationship to Student	Date