

**DEMOPOLIS CITY SCHOOLS
NON-RESIDENT ENROLLMENT APPLICATION**

Date: _____

Name: First _____ Middle _____ Last _____
(As it appears on Birth Certificate) (As it appears on Birth Certificate) (As it appears on Birth Certificate)

Preferred Name: _____ Date of Birth ____/____/____ Age ____ Phone (____) _____
(Used as Primary Contact)

Social Security Number: _____ - _____ - _____ Gender _____ Race _____ Grade _____

Mailing Address (used for primary school mailing): _____
(Street address or Post Office Box Number)

Apartment/Lot # _____ City _____ State Alabama Zip Code _____

STUDENT EDUCATION INFORMATION

Last School Attended: _____ Grade _____

Address: _____
(City) (State) (Zip)

Currently Suspended Yes No Currently Expelled Yes No Previously Expelled Yes No

Alternative School Yes No Special Education Yes No (If yes, please describe _____)
IEP Yes NO (provide copy of IEP Plan)

504 Plan Yes No (attach copy if applicable)

STUDENT CONTACT INFORMATION

(Copies of court-ordered custody agreements restricting visitation from non-custodial parents must be filed in the office.)

Student lives with: _____ **Relationship:** _____
(Please provide Date of Birth as an additional method of security and Identifying Parents, Guardians and Emergency Contacts.)

Mother/Guardian: Name: _____
(First) (Middle) (Last)

Date of Birth: ____/____/____ Relationship to Student: _____

Phone (____) _____ Phone (____) _____ Work (____) _____
(Used as Primary contact number for Blackboard Messenger)

Mailing Address (Used for primary school mailing): _____
(Street address only)

Apartment/Lot# _____ City _____ State AL Zip _____

Check all that apply for **Mother/Guardian:** Allowed to pick up student? Authorized to view INow Home Portal?

Father/Guardian: Name: _____
(First) (Middle) (Last)

Date of Birth: ____/____/____ Relationship to Student: _____

Phone (____) _____ Phone (____) _____ Work (____) _____
(Used as Primary contact number for Blackboard Messenger)

Mailing Address (Used for primary school mailing): _____

Apartment/Lot# _____ City _____ State AL Zip _____

Check all that apply for **Father/Guardian:** Allowed to pick up student? Authorized to view INow Home Portal?

List Siblings and grade levels _____

EMERGENCY CONTACT INFORMATION: "I, the undersigned, do hereby authorize school officials to contact the persons below in the event of an emergency involving this student, and do authorize the named physician to render such treatment as may be deemed necessary in an emergency, for the health of said child. In the event physicians, other persons named below, or parents cannot be contacted, school officials are hereby authorized to seek emergency assistance necessary for the health of the aforesaid child. I will not hold school officials financially responsible for the emergency care and/or transportation for said child."

Persons who can check out or pick up your child and who may be contacted in cases of accident, illness, injury or other emergency, if parents/guardians cannot be reached. *Please provide Date of Birth as an additional method of security in identifying parents, guardians and emergency contacts.*

1st EMERGENCY CONTACT

Name: _____ Phone (____) _____
(First) (Last)

Allowed to pick up student Date of Birth ____/____/____ Relationship to Student _____
(Ex. Aunt, Uncle, Grandmother, Stepfather, Stepmother)

2nd EMERGENCY CONTACT

Name: _____ Phone (____) _____
(First) (Last)

Allowed to pick up student Date of Birth ____/____/____ Relationship to Student _____
(Ex. Aunt, Uncle, Grandmother, Stepfather, Stepmother)

3rd EMERGENCY CONTACT

Name: _____ Phone (____) _____
(First) (Last)

Allowed to pick up student Date of Birth ____/____/____ Relationship to Student _____
(Ex. Aunt, Uncle, Grandmother, Stepfather, Stepmother)

4th EMERGENCY CONTACT

Name: _____ Phone (____) _____
(First) (Last)

Allowed to pick up student Date of Birth ____/____/____ Relationship to Student _____
(Ex. Aunt, Uncle, Grandmother, Stepfather, Stepmother)

Signature of Parent/Guardian

Signature of the parent/guardian indicates that the address above is the legal address of residence for the student and that the information provided is up-to-date and current. It is the responsibility of the parent/guardian to provide school officials with verifiable student information and to **notify the school immediately in writing** of any change in student information. **Falsification of residency is prohibited by Alabama Law (section 13A-10-109) Falsifying information or withholding information may lead to removal from school system.**

ADDITIONAL DOCUMENTS NEEDED - FOR OFFICE USE ONLY

- | | |
|---|--|
| <input type="checkbox"/> Withdrawal/Transfer Information | <input type="checkbox"/> Current Alabama Immunization form |
| <input type="checkbox"/> Documentation of established residence (i.e. mortgage title or lease agreement) + plus one additional document (utility bill) | <input type="checkbox"/> Copy of Social Security Card |
| <input type="checkbox"/> Copy of Birth Certificate | <input type="checkbox"/> Custody/Guardianship documentation (if applicable) |
| Most Recent Report Card <input type="checkbox"/> | |
| Student Standing at Prior School: <input type="checkbox"/> Good Standing <input type="checkbox"/> Expelled <input type="checkbox"/> Currently Suspended <input type="checkbox"/> Withdrew prior to Board Hearing | |
| Enrollment information approved: Date ____/____/____ | |
| Temporary Admission approved by the principal pending: _____ | |

Demopolis City Board of Education

Post Office Drawer 759

Demopolis, Alabama 36732-0759

www.dcsedu.com

Phone: (334)289-1670

Fax: (334)289-1689

Kyle Kallhoff
Superintendent

Procedures for Non-Residents Students to Apply for and Receive Permission to Enroll

Student _____ School _____ Grade ____

1. Non-resident students and parents/guardians must meet with the school principal prior to enrolling in the Demopolis City School System.
2. Non-resident students must maintain a **95% attendance rate**, a minimum of a **C average or 2.5 grade point average**, and have **limited discipline infractions**.
3. Attendance, grades, and discipline will be monitored and reviewed regularly. The superintendent reserves the right to withdraw the student at any time in which attendance, grades, or discipline become an issue.
4. The Demopolis City School System is **not responsible for providing transportation** for non-resident students.
5. Non-resident student enrollment is contingent upon available space in programs or classes.

Student Signature and Date _____

Parent/Guardian Signature and Date _____

Principal Signature and Date _____

Superintendent Signature and Date _____

For Office Use

_____ \$50.00 Non-Refundable Application Fee

Attach copy of receipt to this form