

2020-2021 School Year Iowa Open Enrollment Application

***Iowa Law requires an application for each child in a family requesting open enrollment to be sent to both to the resident and receiving districts on/or before deadline in order to be considered for approval.*Iowa Code 282.18(2)**

Deadlines: March 2, 2020: Grades 1-12

September 1, 2020: Kindergarten and Preschool special education

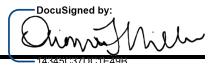
1. Full Legal Name of Student: Hannah Jean Miller
2. Date of Birth: 06-22-2004
3. Grade for 2020-2021: 11
4. Gender: ~~Female~~ or Male
5. Parent/Guardian Aimee Miller
6. Telephone (Helpful to have more than one): 641-425-8074
7. Resident Address Street/Box, City, Zip, County: 2130 Washington Ave Rowan IA 50470 Wright
8. Email Address aimee.frohlingmiller@gmail.com
9. Resident District Belmond-Klemme Attendance Center Belmond-Klemme
10. District Requested Clayton Ridge Attendance Center* Iowa Virtual Academy
*Request does not guarantee placement
11. Is this application a request to continue education in the former district of residence following a move to a new district? ~~Yes~~ or No No
12. Please indicate if the applicant has a sibling currently under open enrollment.
 Sibling Name: _____ District/School open enrolled _____
13. The student will be enrolled in the following (check all that apply):
 Regular Education Special Education _____
 Home School (CPI) _____ Home School Assistance Program _____
 Dual Enrollment–Academic _____ Dual Enrollment–Activity Program _____
 Open enrolling to an approved online program and participating in cocurricular activities in resident district
14. Is your child currently eligible for receiving special education services? Yes or No No
15. Is your child currently being evaluated for special education services? Yes or No No
16. Is your child currently receiving English Language Learning services? Yes or No No
17. Is the student currently under suspension or expulsion from school? Yes or No No
 If yes, when will the suspension / expulsion be complete? _____
18. **This section should be completed IF the application is being filed after March 2 for grades 1-12. List date of change.**
 - a) Change in district of residence due to: family move, change in _____
 Marital status, foster care, adoption, or treatment program
 - b) Participation in foreign exchange program _____

- c) Failure of negotiations for reorganization or whole grade sharing _____
- d) Loss of accreditation or revocation of a private or charter school _____

19. Is the application being filed due to pervasive harassment or severe health? Yes or No
 If yes, briefly describe events occurring after March 1 and provide the name of a district employee familiar with the student on a separate sheet. NO

20. Will you request transportation assistance? Yes or No NO
 If yes, attach proof of income and number in household to the application sent to the resident district.

I certify the above information is true and I have sent a copy of this form to my resident district and to the district I want my child to attend.

DocuSigned by:


7/21/2020

Signature of Parent or Guardian and Date Signed

CAUTION: Knowingly providing false information on this form will invalidate the application.

Receiving District

The receiving district has the authority to take action on all applications (before or after deadline) except:

- a) Those **alleging harassment** or **severe health need condition** that cannot be accommodated in resident district.
- b) Resident district has a **diversity plan**.

Date application was received: _____

If the child has an IEP date of consultation with the resident district and AEA _____

Approved: _____
 Signature of Superintendent and Date Signed

Denied: _____
 Date of School Board Action and Signature of Superintendent

If denied, indicate reason:

- _____ Request was not filed by March 1 and does not meet good cause.
- _____ Insufficient classroom space.
- _____ Student under suspension or expulsion.
- _____ Appropriate special education program is not available.

Resident District

Resident district is taking action on this application because of the following:

- _____ Resident district has a diversity plan on file with Department of Education.
- _____ Student alleges pervasive harassment that began or escalated after deadline.
- _____ Student has a severe health condition that began or escalated after deadline.
- _____ Application filed late with no good cause

Date application was received: _____

Approved: _____
 Signature of Superintendent and Date Signed

Denied: _____
 Date of School Board Action and Signature of Superintendent

If denied, indicate reason:

- _____ Does not meet diversity plan criteria.
- _____ Does not meet criteria for severe health condition.
- _____ Does not meet criteria for pervasive harassment.
- _____ Application filed late.

Certificate Of Completion

Envelope Id: E888AA237C1D456DB52B05DF24B0B5FA	Status: Completed
Subject: Please DocuSign: 20-21 open enrollment application.pdf	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 2	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Integration Docusign
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	2300 Corporate Park Dr
	Herndon, VA 20171
	smarks@k12.com
	IP Address: 208.126.130.133

Record Tracking

Status: Original 7/21/2020 8:49:22 PM	Holder: Integration Docusign smarks@k12.com	Location: DocuSign
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Signer Events

Signer Events	Signature	Timestamp
Aimee Miller aimee.frohlingmiller@gmail.com Security Level: DocuSign.email ID: 1 7/21/2020 8:49:23 PM, Sign In Each Location	Completed Signature Adoption: Drawn on Device Using IP Address: 208.126.130.133	Sent: 7/21/2020 8:49:23 PM Viewed: 7/21/2020 8:49:42 PM Signed: 7/21/2020 8:53:20 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

In Person Signer Events

In Person Signer Events	Signature	Timestamp

Editor Delivery Events

Editor Delivery Events	Status	Timestamp

Agent Delivery Events

Agent Delivery Events	Status	Timestamp

Intermediary Delivery Events

Intermediary Delivery Events	Status	Timestamp

Certified Delivery Events

Certified Delivery Events	Status	Timestamp

Carbon Copy Events

Carbon Copy Events	Status	Timestamp
IAVA iavafax@k12.com Security Level: Email, Account Authentication (None)	COPIED	Sent: 7/21/2020 8:53:21 PM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		

IAVA Admin iavaoffice@iowavirtual.org Operations Manager K12 Inc. Security Level: Email, Account Authentication (None)	COPIED	Sent: 7/21/2020 8:53:21 PM
Electronic Record and Signature Disclosure: Not Offered via DocuSign		

Witness Events

Witness Events	Signature	Timestamp

Notary Events

Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	7/21/2020 8:53:21 PM
Certified Delivered	Security Checked	7/21/2020 8:53:21 PM
Signing Complete	Security Checked	7/21/2020 8:53:21 PM
Completed	Security Checked	7/21/2020 8:53:21 PM

Payment Events	Status	Timestamps
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