

PART - TIME STUDENT ENROLLMENT APPLICATION

School: _____

Student Name: _____

Birth Date: _____ **Grade:** _____

Parent/Guardian Name: _____

Address: _____

Courses Requested: _____

Required Permission and Statements:

1. I request my child be enrolled in Wrangell Public Schools as a part-time student.
2. I grant permission for my child's name and grade to be released on a district list of part-time students or part-time student applicants.
3. I acknowledge my child will comply with all applicable Wrangell Public Schools policies and procedures including those relating to school decorum and attendance.
4. I understand that except when my child is an authorized rider on a district school bus, I am responsible for my child's transportation to and from district schools and I agree to defend and hold Wrangell Public Schools harmless for any claim of injury to my child or injury or damage caused by my child while my child is traveling to or from district schools by means other than district approved transportation.
5. Please provide a description of your child's primary educational program:
 - a. Correspondence _____
 - b. Private School _____
 - c. Home School _____

Parent/Guardian Signature: _____

Date: _____

Adoption Date: September 18, 2012

Reviewed: October 9, 2013
