



Bristol Local School

1845 Greenville Rd, P.O. Box 260
Bristolville, OH 44402
P: 330-889-3882
Fax: 330-889-2529

Christopher J. Dray, Superintendent
christopher.dray@bristol.k12.oh.us

BRISTOL OPEN ENROLLMENT APPLICATION FOR 2019-2020

Thank you for considering the Bristol Local School District to enroll your child under the State Wide Open Enrollment Policy. Listed below is a copy of the policy:

“The Board shall permit any eligible students from the State of Ohio to apply and enroll in the Bristol Local School District free of any tuition obligation, provided that all procedures as outlined in the administrative regulations are met.”

Requirements include:

1. Applications will be acted on in the order in which they are received. Please complete a separate application for each child you would like to enroll.
2. Parents must have official records sent to Bristol. This may be accomplished by signing a release for records. The records are to include disciplinary, physiological, health, and custody papers (if applicable), as well as academic records. You must enroll your child in the school district in which you reside.
3. If your child plans to participate in athletics, you will need to receive an athletic release from your home district. This should take place once you are notified of acceptance at Bristol (By OHSA rules, a student will only receive one such release. If a student would return to their home district they would be ineligible for that one year).
4. A student who has been suspended or expelled for 10 consecutive days in the immediately preceding term will not be accepted.
5. Acceptance will be contingent upon availability of capacity limits by grade level, school building, and educational programs.
6. Transportation will be a parental responsibility, however, transportation will be provided from an existing bus stop within the district.

For answers to specific questions, please feel free to contact Christopher Dray, in the Superintendent's Office, at (330) 889-3882.



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OPEN ENROLLMENT APPLICATION School Year 2019-2020

APPLICATIONS WILL BE ACTED ON IN THE ORDER IN WHICH THEY ARE RECEIVED

Date: _____

Student's Name: _____ Student's SS#: _____

Parent/Guardian's Name _____

Home Address: _____

Home Telephone #: _____ Other #: _____

School District you live in: _____

School District you currently attend: _____

Address of current school: _____

Student's Present Grade: _____ Grade for 2019-2020: _____

Is the student enrolled in a special education program? _____ Yes _____ No

STUDENTS ARE NOT ACCEPTED IF SUSPENDED OR EXPELLED FROM SCHOOL FOR 10 OR MORE DAYS DURING THE PAST SCHOOL YEAR. I CERTIFY BY MY SIGNATURE BELOW THAT THE INFORMATION SET FORTH ABOVE IS TRUE AND COMPLETE, THAT I WILL BE RESPONSIBLE FOR THE DAILY TRANSPORTATION OF THE STUDENT NAMED ABOVE TO AND FROM SCHOOL IN ACCORDANCE WITH THE RULES OF THE BOARD OF EDUCATION, AND THAT THE STUDENT WILL COMPLY WITH THE SAME RULES OF CONDUCT THAT APPLY TO ALL OTHER STUDENTS IN THE BRISTOL LOCAL SCHOOL DISTRICT.

Parent/Guardian Signature

Date

For office use only: Received by: _____ Date: _____ Time: _____

Approved _____ Rejected _____ Superintendent _____

Principal

Reason: _____

Copies to: ___ Educating District (Superintendent's Office) ___ Resident District
___ Parent ___ HS/Elem Office ___ HS/Elem Principal