Bristol Local School

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Christopher J. Dray, Superintendent
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OPEN ENROLLMENT APPLICATION
School Year 2026-2027

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

Date: _____

Student's Name: _____DOB:_____

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 2026-2027: _____

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 REPSONSIBLE 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 I NTHE 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