



**For Office Use Only:**  
(MUST be completed by  
Attendance Specialist before  
processing)  
Date Received: \_\_\_\_\_  
Residential Transfer: Y / N  
Out of District: Y / N  
In District Student ID Number:  
\_\_\_\_\_

**Gilbert Public Schools**  
**Open Enrollment Application**  
**Applications Will be Accepted Starting January 16th**  
**Must Reapply Annually**

School Requested: \_\_\_\_\_ School Year Applying For: \_\_\_\_\_

Grade Level Applying For: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Current School: \_\_\_\_\_ Current District: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Address: (include full address including the street, city, zip code)  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Reason for seeking admission: (If applicable, attach more information)  
\_\_\_\_\_

Is either parent a Gilbert Public Schools employee: \_\_\_ Yes \_\_\_ No

Location: \_\_\_\_\_ Position: \_\_\_\_\_

Siblings currently attending this school:

\_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_

Programs student currently participates in:

\_\_\_ Gifted/Talented (attach any gifted testing scores if applicable)

\_\_\_ ELL

\_\_\_ Section 504 (If not a current GPS student, **must** attach paperwork)

\_\_\_ Special Education (If not a current GPS student, **must** attach current IEP)

Is the student on or being considered for a long-term suspension (11+ days) or expulsion? \_\_\_Yes\_\_\_No

Is the student under a condition imposed by court pursuant to A.R.S. 8-301? \_\_\_Yes \_\_\_No

-If yes, is the student in compliance with condition? \_\_\_Yes \_\_\_No

Is the student identified and receiving services under the McKinney-Vento Act? \_\_\_Yes\_\_\_No

Previous school(s) the student has attended:

Name of School(s)	Year(s) Attended	Address	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____

**Signing this application affirms the following:**

1. Transportation will NOT be provided by the district except as set forth in A.R.S. 15-816.
2. The student must agree to follow all rules and regulations of the receiving school, including standards for homework, student conduct and attendance.
3. Grades 9-12 Only- Eligibility for athletics and extracurricular activity is affected when students transfer from one school to another. Students considering a possible transfer must contact the Athletic Director of the receiving school to determine eligibility prior to transferring.
4. This form will be used to access information from former school districts (i.e. discipline, attendance, grades)
5. Proof of custody has been provided, if applicable.
6. Acceptance is on a yearly basis.

**Providing false information on this form may result in the application being denied or admission being revoked.**

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**For Office Use Only**

\_\_\_Approved

\_\_\_Denied

\_\_\_Waiting List

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_