Anderson School District One
SCHOOL CHOICE/OUT OF DISTRICT APPLICATION

Students typically attend school in the district and attendance area for which they are zoned. However, Anderson School District One does have a limited open enrollment policy. A parent/guardian who lives in the Anderson One school district may choose to enroll his/her student at another Anderson One school other than the one for which he/she is zoned if the criteria below are met. Also, a parent/guardian who lives outside the Anderson One school district may choose to enroll his/her student at an Anderson One school other than a school in the district for which he/she is zoned if the following criteria are met.

- The parent must provide his/her own transportation.
- The receiving school must have room – defined as a 24:1 or less student: teacher ratio in the grade the student is entering. (18:1 Title I Schools)
- School choice is only available at the beginning of the school year prior to the first day of school. Applications must be completed each school year, and you must complete an application for each child. All sections must be completed on all applications.
- If all of the above criteria are met, the student will be admitted for one school year only. The parent must complete another application and the above criteria must be met each year school choice is requested. Acceptance will be determined each year depending on student enrollment.
- Out of district tuition in the amount of $2735.00 (for the 2020-2021 school year) is required for students living outside of Anderson School District One.

Section 1 Completed by Parent/Legal Guardian

Student Full Name _________________________________  Current Grade ________  Next Grade _______
Parent/Legal Guardian Name ________________________  Phone ______________________________
Street Address _____________________________  City _______________  State ______  Zip ___________
Mailing Address ____________________________  City _______________  State ______  Zip ___________
Student DOB ______________________________  Circle One: School Choice      Out of District
School student is zoned to attend __________________  School student wishes to attend________________
Reason for transfer request _________________________________________________________________
Parent/Legal Guardian Signature ________________________________  Date _______________________

Section 2 Completed by School

Approved   Not Approved

Signature of Principal of Requested School ________________________________  Date _______________
Comments: ________________________________

Section 3 Completed by District Office

Date Paid   Amount Paid   Check #   Received by   Approval

________________________________________________________________________________