

FORM A

SCHOOL CHOICE APPLICATION MONROE COUNTY SCHOOLS, FLORIDA

This form must be completed and returned to Monroe County School of Choice or the District School Board of Monroe County, Key West by **April 28, 2017**. The application is subject to annual review.

Home Zoned School _____

Student Name: _____
Last First Middle

Student's Date of Birth: _____
Month Day Year

Father's Name: _____ Telephone # _____

Address: _____

Mother's Name: _____ Telephone # _____

Address: _____

Name of Legal Guardian: _____ Telephone# _____

Address: _____

With Whom Does Student Live? _____

Address: _____
(if different from above)

2016-2017: Grade Level: _____ Sex: Female ___ Male ___

Ethnicity: (Check One) ___ White (Non-Hispanic) ___ Black (Non-Hispanic) ___ Hispanic
___ Asian or Pacific Islander ___ American Indian or Alaskan Native ___ Multiracial

SCHOOL CHOICE

Please read the following information carefully:

Number the schools of choice within your region. For example, number 1 should be your first choice, 2 should be your second choice.

REGION 1 (LOWER KEYS)

REGION 2 (MIDDLE KEYS)

REGION 3 (UPPER KEYS)

___ Gerald Adams Elementary ___ Sugarloaf Elem/Middle ___ Key Largo Elem/Middle
___ Horace O'Bryant Elem/Middle ___ Marathon Middle/High ___ Plantation Key Elem/Middle
___ Poinciana Elementary ___ Stanley Switlik Elementary ___ Coral Shores High
___ Key West High (Big Pine Area Residents only) ___ Full Time Virtual Instruction Program

***TRANSPORTATION TO OR FROM A CHOICE SCHOOL IS NOT PROVIDED UNLESS SPACE IS**

AVAILABLE ON AN EXISTING BUS ROUTE.

SIBLING PREFERENCE

List brothers or sisters you would like assigned to choice school, if space is available.

Choose one option: I choose to place all siblings together regardless of school
 I choose to separate siblings if first choice is not available for all.

Name _____	Grade _____
_____	_____
_____	_____
_____	_____
_____	_____

I certify that the information provided on this application is true.

Parent/Guardian Signature: _____ Date: _____

TENTATIVE Approval or Disapproval by School Principal

- _____ Approved. At this time, there is space available.
- _____ Disapproved. At this time, there is not space available.
- _____ Disapproved. Request is not in zone or region.

Principal Signature Date

THIS SECTION TO BE COMPLETED BY SCHOOL BOARD STAFF

Date _____

Application: Approved () Disapproved ()

On the basis of available space, in conjunction with a lottery system, the District School

Board of Monroe County, Florida assigns _____

to _____ School.

District School Superintendent

APPEAL PROCESS

Hardship cases can be appealed to the Regional School Choice Committee by submitting a request to any School in Monroe County, or to the District School Board of Monroe County, Key West.