

Netcong Elementary School

26 College Road, Netcong, NJ 07857 973.347.0020 • (f) 973.347.3676 • www.netconcongschool.org

2017-18 School Choice Application

<u>Directions:</u> Please complete all required information. Supporting documentation and recommendations (if required) should be sent directly by your current school. If this is not possible, transcripts and recommendations should be included with your application in sealed envelopes with a school official's signature over the seal or mailed directly by your school.

| SECTION I: Su | ident information | | | | |
|---------------------------|-------------------|----------------|-----------------|--|--|
| Last Name: | | First Nan | ne: | | |
| Street Address: | | Date of Birth: | | | |
| City: | | State: | ZIP Code: | | |
| Home Phone: | Cell Phone: | | Gender: □ M □ F | | |
| Parent/Guardian Name: _ | | | | | |
| Parent/Guardian Cell Pho | one: | | | | |
| Parent/Guardian Email: _ | | | | | |
| Student Ethnicity (Option | nal): | | | | |

Ethnic information is required by the U.S. Department of Health, Education, and Welfare Office for Civil Rights. Netcong Elementary School does not discriminate in its admissions policies and practices on the basis of race, color, national origin, sex, or disability. Lenape Valley values diversity AA/EEO.

| SECTION 2: | Academic | Academic Information (to be verified | | ed by current school official) | | |
|--|--------------|--------------------------------------|-----------------------|--------------------------------|------|--|
| Current School: | | | | | | |
| Current School City: | | | Current School State: | | | |
| Current Grade: | ○ PK | 0 K | 0 1 | 0 2 | 0 3 | |
| | 0 4 | 0 5 | 0 6 | 0 7 | 0 8 | |
| What public school | would you a | ttend if you were | not a school cl | hoice candidat | e? | |
| | | | | | | |
| Does the applicant currently have or utilize a(n): | | IEP | O Yes | O No | | |
| | | | 504 Plan | O Yes | O No | |
| | | | ESL Program ○ Yes | | O No | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| I verify that the info | rmation in S | ection 2 is comple | ete and accurat | te. | | |
| School Official Nan | ne. | | | | | |
| | | | | | | |
| School Official Title | e: | | | | | |
| School Official Sign | nature: | | | | | |
| School Official Con | tact Number | : | | | | |

Answers to this section will not impact admissions decisions.

Netcong Elementary School

School Choice Program Records Release

Parent/Guardian Release: I give permission for my child to apply to Netcong Elementary School. I also give permission for my current school to release all records listed below to Netcong Elementary School for admissions consideration.

| Student Signature: | Date: |
|----------------------------|-------|
| Parent/Guardian Signature: | Date: |

Please have your current school counselor or official send the following documents to Netcong Elementary School:

- 1. Complete report cards of all grades completed and a current grade or progress report (to verify enrollment in a NJ public school)
- 2. Child Study Team Records/IEP/504 Plan (if applicable)

Please Return Application and Supporting Materials by December 1, 2016 to:

Netcong Elementary School 26 College Road Netcong, NJ 07857

Attn: Dr. Gina Cinotti, Chief School Administrator

NOTICE OF INTENT TO PARTICIPATE In the Interdistrict Public School Choice Program For the 2017-2018 School Year

(Give this form to the Superintendent of your Current School)

DATE: _____

| ΓΟ: The Superintendent/Chief School Administrator of _ | |
|--|---|
| TO. The supermendent/emer sensor runninguator of | (Student's Resident District) |
| As Parent/Legal Guardian of the student named below, I student's intent to enroll in the Interdistrict Public School child is accepted into a choice program, my child's resident district by Jan. 16, 2017, or when enrollment is confirm resident district, but parents should request a signed and dates. | 1 Choice Program in September 2017. If my t district will be notified of such by the choice ed. This form requires no response from the |
| The resident district must be notified by January 16, 2017 who will be enrolling in the 2017-2018 school year. There ate choice student applications. In these cases, the resident student confirms enrollment. | may be cases when the choice district accepts |
| Transportation of choice students will be the responsibility meets the eligibility requirements of state law and the chatudent's residence. Information on school choice transportation/pwww.state.nj.us/education/finance/transportation/p | oice district school is within 20 miles of the sportation and procedures can be found at |
| Transportation of choice students is not guaranteed requirements: the school must be within 20 miles of your st will exceed \$884, the parent/guardian will be given \$884 cases, the option of paying the additional amount over \$2017, parents should receive notification of their transporter information, read the Transportation Procedures for | udent's residence. If the cost of transportation as aid in lieu of transportation and, in some 884 to receive the transportation. By Aug. 1, relation options from the resident district. For |
| Student's First Name: | Student's Last Name: |
| Student's Home Address: | |
| CURRENT SCHOOL: | CURRENT GRADE: |
| SIGNED: | PRINT: |
| Signature of Parent/Guardian | Name of Parent/Guardian |
| Address of Parent/Guardian | Contact Number |