

**School Choice - to Alma for School Year 2021-22** revised 1-11-21

**APPLICATION FOR SCHOOL CHOICE TRANSFER**

This form must be submitted to both the Resident and the Non-Resident Districts before May 1, 2021

**TYPE OF SCHOOL CHOICE TRANSFER REQUESTED**

Please choose only one option per form submitted.

Public School Choice Act of 2015

Opportunity School Choice Act

**NOTE:** Applications for the Public School Choice Act of 2015 must be sent to the resident and nonresident districts. Applications for the Opportunity School Choice Act must be sent to the resident district, the nonresident district, and the Division of Elementary and Secondary Education. *If you are unsure which type of school choice best applies, please review the page following this form for information about the different types of school choice that may be available to your student.*

**MILITARY FAMILY INFORMATION** Does the applicant have a parent or guardian who is an active-duty member of the military who has been transferred to and resides on a military base? **NOTE:** In order to take advantage of school choice options available to military families who have recently transferred to a military base, you must submit military transfer orders and proof of residency on the military base to the resident and nonresident school districts. If so, please state the date of the parent's or guardian's arrival on the military base:

Print APPLICANT or Student Full Name:

Student Date of Birth:

Male  Female

Circle Grade for School Year 2021-22: If Kindergarten, list previous early childhood programs:  
K 1 2 3 4 5 6 7 8 9 10 11 12 \_\_\_\_\_

Does the student have \*special needs or require \*special programs:  Yes  No

IEP  504 Plan  Speech  ALE or Alternative Educ.  Dyslexia  
 Other: \_\_\_\_\_

\*Documentation required if selecting Yes.

If in grade 7-12: Is applicant interested in becoming eligible for athletics? If yes, list sport(s):

Is the applicant currently under expulsion?  Yes  No If yes, district enter name:

Ethnic Origin (Check ONE - for data reporting purposes only)

2 or more races  White  African-American  Asian  Hispanic  
 Native American/Native Alaskan  Native Hawaiian/Pacific Islander

**RESIDENT SCHOOL DISTRICT OF APPLICANT**

District Name: \_\_\_\_\_ School Name: \_\_\_\_\_

**School Choice - to Alma for School Year 2021-22** revised 1-11-21

**APPLICATION FOR SCHOOL CHOICE TRANSFER**

This form must be submitted to both the Resident and the Non-Resident Districts before May 1, 2021

**NONRESIDENT SCHOOL DISTRICT APPLICANT WISHES TO ATTEND**

District Name: ALMA SCHOOL DISTRICT Address: 916 HIGHWAY 64 EAST ALMA, AR 72921  
Phone Number: 479-632-4791 FAX: 479-632-4793 County: CRAWFORD

Does the applicant currently attend Alma Schools?  Yes  No

If yes, circle the grade(s) in which the student has attended Alma Schools:

K 1 2 3 4 5 6 7 8 9 10 11

List first name, last name & grades of siblings OR step-siblings currently enrolled in Alma pursuant to the Public School Choice Act of 2013 or the Public School Choice Act of 2015:

_____	_____
_____	_____
_____	_____
_____	_____

**PARENT OR GUARDIAN INFORMATION**

Print Parent Name:

Parent Phone:

Mailing Address:

Work Phone:

Place of Work:

Parent/Guardian Signature:

Today's Date:

**DISTRICT USE ONLY**

Resident District LEA#:

Date & Time Received by Resident District:

Nonresident District LEA#: **1701**

Date & Time Received by Nonresident District:

Student's State Identification#:

Application Accepted:  Yes  No Application Rejected:  Yes  No

Reason for Rejection if applicable:

Date Notification Sent to Parent/Guardian of Applicant:

Date Notification sent to Resident District: \_\_\_\_\_

Date Notification sent to Parent/Guardian of Applicant: \_\_\_\_\_