



**INSTRUCTIONS:** Fill out all information completely and accurately. Missing or inaccurate data may hinder processing or result in errors relating to acceptance/denial. Deliberately providing false data may be grounds for denial of the application.

Submit completed form to the district administrator of the nonresident school district.

School Year \_\_\_\_\_

Collection of this data is a requirement of s. 118.52, Wisconsin Stats.

**I. GENERAL INFORMATION**

To be completed by the parent, legal guardian or pupil (if age 18 or older) and submitted to the nonresident school district. The application must be received in the nonresident school district office no later 4:00 p.m. on the date that is six weeks before the scheduled start of the course for which the pupil is applying. A postmark **does not** constitute timely submission.

Pupil Name <i>Separate application form is required for each pupil</i>	Email Address	Telephone Area/No.	Grade <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12
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Residence Street Address	City	Zip Code
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School District in which the Pupil Resides ( <b>Resident District</b> ) or District of Attendance for Open Enrolled Pupils	Public School Pupil is Currently Attending
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School District in which the pupil is applying to attend a course or courses ( <b>Nonresident District</b> )	If the pupil wishes to attend the course in a specific school in the nonresident district, indicate the name of the school. <b>Note:</b> assignment to a specific school for the course is not guaranteed.
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Name of the Course or Courses the Pupil is Applying to Attend	Course Number if applicable	Scheduled Course Start Date
1.	1.	1.
2.	2.	2.

- Yes    No
1.   Does the pupil currently receive special education in accordance with an individualized education program (IEP)?
  2.   Has the pupil been expelled any time during the current or preceding two years?
  3.   Are disciplinary proceedings pending that could lead to expulsion?

**Transportation:** Parents are responsible for transporting the pupil to and from the course that the pupil is attending. If the parent is unable to pay the cost of transportation, the parent may apply to the Department of Public Instruction (DPI) for reimbursement of the transportation costs. The DPI must give preference to pupils who meet the income criteria to be eligible for a free or reduced price lunch. Wis. Stat. 118.52(11)(b)

Will you be applying for the transportation reimbursement:       Yes       No

If yes, you must submit an online claim for reimbursement of transportation costs (PI-9413) to the DPI *at the end of the school year* that the pupil attends a course. The online claim form will be available on our website starting June 1 at <https://dpi.wi.gov/oe>.

**II. PARENT SIGNATURE AND RELEASE OF RECORDS**

**Note to parent:** Your signature on this form grants permission for the resident school district to provide the pupil's transcripts as necessary to determine whether the pupil is a high school pupil and whether the pupil meets the nonresident district's prerequisites for the course. Further, s. 118.52 (10), Wis. Stat., authorizes the nonresident school district to request any pupil records relating to expulsion. This consent is effective until the pupil completes the course or until the application is withdrawn by the parent.

Signature of Parent/Guardian or Pupil <i>if 18 or older</i>	Parent/Guardian Name <i>Please print</i>	Date Signed
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**III. FOR SCHOOL DISTRICT USE ONLY**

The cost of providing a course to a pupil shall be determined by first dividing the total number of hours of instruction provided to the pupil in the course by 1,137, then multiplying the result by the annual tuition rate as determined by s. [121.76 \(2\) \(a\)](#), Stats. For purposes of determining hours of instruction for virtual charter school coursework, the total number of hours of instruction shall be 135 hours per credit.

**Nonresident school district must send a copy of the completed form to the resident school district.**

**IV. NONRESIDENT SCHOOL DISTRICT APPROVAL/DENIAL**

*To be completed by the **nonresident** school district and sent to the parent no less than one week before the scheduled start of the course (a postmark of at least three days before the parent is required to receive it shall constitute timely notification).*

Name of Course \_\_\_\_\_

Approved  
School at which the pupil will attend the course: \_\_\_\_\_

Denied  
Reason for Denial: **Required**

Space is not available in the course.

Pupil does not meet the school district's policies and criteria for entrance into the course.

Ineligibility: The application was submitted less than 6 weeks before the start of the course; the pupil is enrolled in private school or homeschool; or the pupil is not in a high school grade.

Name of Course \_\_\_\_\_

Approved  
School at which the pupil will attend the course: \_\_\_\_\_

Denied  
Reason for Denial: **Required**

Space is not available in the course.

Pupil does not meet the school district's policies and criteria for entrance into the course.

Ineligibility: The application was submitted less than 6 weeks before the start of the course; the pupil is enrolled in private school or homeschool; or the pupil is not in a high school grade.

Name and Title of **Nonresident** School District Official \_\_\_\_\_

Signature \_\_\_\_\_  
➤

Date Signed *Mo./Day/Yr.* \_\_\_\_\_

**V. RESIDENT SCHOOL DISTRICT OR DISTRICT OF ATTENDANCE DENIAL AND NOTICE OF NOT MEETING HIGH SCHOOL GRADUATION REQUIREMENTS**

*To be completed by the **resident** school district or district of attendance and sent to the parent no less than one week before the scheduled start of the course (a postmark of at least three days before the parent is required to receive it shall constitute timely notification).*

Name of Course \_\_\_\_\_

Approved  
 Denied  
Reason for Denial: **Required**

The course conflicts with the pupil's individualized education program (IEP).

The cost of the course constitutes an undue financial burden on the resident school district.

Ineligibility: The application was submitted less than 6 weeks before the start of the course; the pupil is enrolled in private school or homeschool; or the pupil is not in a high school grade.

Name of Course \_\_\_\_\_

Approved  
 Denied  
Reason for Denial: **Required**

The course conflicts with the pupil's individualized education program (IEP).

The cost of the course constitutes an undue financial burden on the resident school district.

Ineligibility: The application was submitted less than 6 weeks before the start of the course; the pupil is enrolled in private school or homeschool; or the pupil is not in a high school grade.

Name and Title of **Resident** School District or District of Attendance Official \_\_\_\_\_

Signature \_\_\_\_\_  
➤

Date Signed *Mo./Day/Yr.* \_\_\_\_\_

The course does not meet the high school graduation requirements in the resident school district or district of attendance.  
**NOTE:** *This notification is provided for the pupil's/parent's information. Whether the course meets the high school graduation requirements is not grounds for denial by the resident district.*

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**NOTE:** *This notification is provided for the pupil's/parent's information. Whether the course meets the high school graduation requirements is not grounds for denial by the resident district.*

**VI. NOTICE OF RIGHT TO APPEAL**

If the pupil's application is denied by either the resident or the nonresident school district, the pupil or parent may appeal the denial to the Department of Public Instruction within 30 days of receipt of the notice of denial. The appeal may be in the form of a letter or a legal brief and shall state the decision being appealed, the specific reasons for the appeal, including why the appellant believes the school board's decision was arbitrary or unreasonable, and any other facts relevant to the appeal. The appeal shall be signed by the appellant or the representative of the appellant. A copy of this completed form must be included with the appeal. The Department's decision is final and may not be appealed to circuit court. The appeal should be sent to: Open Enrollment Consultant, School Management Services, Department of Public Instruction, PO Box 7841, Madison, WI 53707-7841

**VII. NOTIFICATION THAT PUPIL WILL/WILL NOT ATTEND COURSE**

*To be completed by the parent and a copy provided to both the resident and nonresident school districts no later than the last week day (excluding state holidays) preceding the scheduled start of the course.*

\_\_\_\_\_ (Name of Pupil)

will  will not  
attend \_\_\_\_\_ (Name of Course)

\_\_\_\_\_ (Name of Pupil)

will  will not  
attend \_\_\_\_\_ (Name of Course)

Signature of Parent/Guardian or Pupil if 18 or older \_\_\_\_\_  
➤

Date Signed *Mo./Day/Yr.* \_\_\_\_\_