

Out of County – Application Period Nov. 3- Dec. 15, 2015 Application to Enter Hillsborough County for 2016-2017 Entering Grades K - 11

 ${f M}$ ail this application and release form to the Office of Student Planning & Placement

901 E. Kennedy Boulevard, Tampa, FL 33602

If you have questions, contact (813) 272-4692.

| Student's Name: | | | | Student Number: |
|---|---------------------------------------|-----------------------------|------------------|------------------------------|
| | | | | |
| | | | | |
| Last First | M.I. | | | |
| Gender: | Date of Birth: (month/day/year) | | | Student's Age: |
| F M | | | | |
| Ethnicity: Are you Hispanic or Latino? | Race: (check all that apply) Optional | | | |
| Optional | American Indian or Alaskan Native | | | Asian Black or African |
| | | | | American |
| Yes No | Native Hawaiian or Pacific Islander | | | White |
| Grade 2016-2017: | Current School: | | | |
| | | | | |
| County of legal residence: | | School Requesting: | | |
| | | | | |
| Mother/Legal Guardian Name: | | Father/Legal Guardian Name: | | |
| | | | -, -0 | |
| | | | | |
| Daytime Phone: | | | Home/Cell Phone: | |
| | | | | |
| Residential Address: | | | City, State, Zip | |
| | | | | |
| Demonstrate include another state it is an later when Art (1 at # | | | # | |
| Remember to include apartment building or lot number. Apt./Lot # | | | | |
| Is parent/legal guardian an employee of Hillsborough County Public Schools? | | | | |
| Yes No | | | | |
| If yes, please include Lawson # | Site | | | |
| Mother/Legal Guardian | Employment address: | | | Employment phone: |
| Employment Information: | | | | |
| (company pama) | | | | |
| (company name) Father/Legal Guardian Employment | Employment address: | | | Employment phone: |
| Information: | | | | Linployment phone. |
| | | | | |
| (company name) | | | | |
| Does your child have an IEP? | If yes, what | | If yes, what | services are they receiving? |
| | Yes No | | | |
| | | | | |

<u>I understand that in order for this application to be processed, the application AND release form must be mailed</u> <u>together to the address listed above</u>. Do not send an application without a release form. If the application arrives without the release, it will be returned. Please turn to page 2 to complete this application.





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Application to Enter Hillsborough County for 2016-2017

Entering Grades K - 11

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If you have questions, contact (813) 272-4692.

State specific reasons why you are requesting a choice hardship. Documentation of hardship must be submitted with this request form. In order for this application to be processed, the application and release form must be mailed together to the address listed above.

- Please make a copy of both documents for your records.
- Applications are only accepted via U.S. mail.
- Approval of this Choice Hardship does not confer athletic eligibility.
- Choice Hardship may be revoked based on unsatisfactory conduct, attendance and scholarship or if the reason for which the Choice Hardship was granted is no longer applicable.
- If approved, this Choice Hardship is valid only for the requested school year and expires at the end of the school year. Families must re-apply and obtain a release from county of legal residence every school year.
- A separate form must be completed for each child requesting a release.
- Parents are responsible for transportation.
- You will receive notification of your school placement in late May 2016.

<u>I understand that in order for this application to be processed, the application **AND** release form must be mailed together to the address listed above. Do not send an application without a release form. If the application arrives without the release, it will be returned.</u>

