

Please check if
ZONE EXCEPTION ONLY

Anchorage School District
5530 E Northern Lights Blvd, Anchorage, AK 99504-3135

OFFICE USE ONLY
School Year Requested _____
Grade Level Requested _____

ZONE EXCEPTION/LOTTERY APPLICATION FORM

(Use One Form Per Student Applicant)

1. Applicant Information

Program and/or School Requested:

Student Name: _____ Student number _____

Student's Birthdate: ____/____/____ Student home school _____
Mo Day Yr

Student Gender: _____ Current Grade _____

2. Parent/Guardian Information (*may be released for "Waiting List Directory")

* Parent/Guardian Name: _____
Last First Middle

* Mailing Address: _____

Residence Address: (If different than mailing address) _____

* Telephone: *Home _____ Work _____ Emergency _____

* Parent/Guardian signature for release _____

3. Sibling Information

Does the above applicant have a brother or sister currently in this school? Yes _____ No _____

If yes, provide sibling name: _____
Last First Middle

Is there a sibling also applying on a separate application? Yes _____ No _____

What is the name? _____ Grade Level _____

4. Zone exception only

- I. Open enrollment (subject to space available).
- II. Medical/extenuating circumstances—written justification to be attached to this form.
- III. Continuation of current zone exception.
- IV. Grandfather due to boundary change.

If zone exception approved, the following conditions must apply:

- 1. Appropriate ASAA eligibility rules must be followed.
- 2. Parents are responsible for student transportation.
- 3. Students must arrive and depart at times designated by the principal.
- 4. Disciplinary concerns can cause revocation of zone exception.

ADMIN. USE ONLY

Allowed Denied _____
Home School

Allowed Denied _____
Requested School

Allowed Denied _____
Division Administrator

5. Parent/Guardian Statement

I understand that if no space is currently available for placement of the applicant, this application will be held for inclusion in the next lottery process for the program/school requested. I have been given a copy of the Open Enrollment-Lottery Procedure and a description of the program for which this application is being submitted. I realize, too, that this application does not guarantee admission to the program/school and that the lottery procedure will place the applicant's name on a wait list for the program/school. I understand that if I wish to enter any other school or program, under the open enrollment policy it is my responsibility to file additional applications at those schools. **Any false statement is cause for nullification of the zone exception/lottery selection.**

Parent/Guardian Signature: _____ Date: _____

6. School Use Only

Date this application received: ____/____/____ Administrative Signature: _____