

**FORMS MUST BE RECEIVED AT  
200 N. MONROE ST., EUGENE OR 97402  
POST LOTTERY 2013-14**

**Please provide the following information about your student**

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender  Male  Female

Grade Entering Fall 2013 \_\_\_\_\_ School Now Attending \_\_\_\_\_ Neighborhood School in Fall 2013 \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Please write up to three schools on the lines below. (See [4j.lane.edu/schools](http://4j.lane.edu/schools) for a list of schools)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please complete additional parent/guardian information**

Parent/Guardian (1) First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Parent/Guardian (2) First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

**Parental Permission to Disclose Free/Reduced Meal Qualification**

**This section is NOT an application for Free or Reduced lunch.**

**Please fill out this section ONLY if you are applying to one of the following schools and you believe you are eligible to receive priority in the lottery based on current free and reduced lunch status:**

***Buena Vista, Camas Ridge, Charlemagne at Fox Hollow, Edgewood, Edison, Gilham or Yujin Gakuen***

To Parents or Guardians of Students Who Qualify for Free or Reduced Meals:

Federal law requires that schools limit access of records to students who qualify for free or reduced price breakfast and lunch. The name listed below can only be used by food service staff in the delivery of food service and by those who administer federal grant programs and by those who must report individual student data to state or federal government.

For names to be used for other purposes requires prior consent from the student's parent or guardian. If consent is given, **district policy is to limit use of this information to legitimate educational purposes.** By signing this consent form, you are allowing additional district staff to have access to your student's status for the purpose of **receiving priority status in the school choice lottery.** Priority will be given to students who qualify for free or reduced meals, and are applying to elementary schools that are below the district average for free or reduced meals (see above).

I have read and understand the information above and, as parent or guardian, authorize the release of information to district personnel stating that the following student qualifies for free or reduced meals through the National School Lunch Program.

Student (full name): \_\_\_\_\_ Current School: \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_

*Continued on next page*

Eugene School District 4J • Post-Lottery In-District School Choice Request 2013–2014

**Please complete the following additional information as is applicable**

**Applying for Sibling Priority**—Priority will be given to students who request transfer to a school that will be attended during the coming school year by another member of the requesting student's immediate household.

**Yes** Sibling Name \_\_\_\_\_ Grade (Fall 2013) \_\_\_\_\_

School Sibling Attends \_\_\_\_\_ Sibling Birthday \_\_\_\_\_

**Yes** Please check if the student is a heritage Spanish speaker and wishes to be considered for priority at Buena Vista Elementary School and River Road/El Camino del Río.

**Twins**—The parents of twin students who want both of their children to participate in the lottery have two options:

**Yes**—Parents may submit one joint application. Both names would be placed in the same position on the waiting list. If one twin is accepted, then both twins are accepted.

**No**—Parents may submit two separate applications. The two twins would be placed on the waiting list in the order they are selected. If only one twin is accepted the other twin may be considered for placement in the school the following year.

**Twins Applying Jointly?**  **Yes** Twin's first and last name \_\_\_\_\_  **No**

**Students with Disabilities—Special Education /Section 504 in School Choice Process**

Parents of special education students and Section 504 students may apply to transfer their student to a school other than their neighborhood school or the school listed on the student's IEP or Section 504 plan, as allowed by the district's school choice policy.

**Disabled Students**—If a student with a disability is accepted through school choice, his or her position on the list will be held at the choice school until the district has objectively determined whether the choice school can provide appropriate special education and related aids and services for the student, and there is space in the program. If the Special Education program does not have space or the student's IEP or Section 504 plan cannot be implemented at the choice school, the student will be denied transfer into that choice school. If necessary, an IEP or Section 504 meeting may be convened to determine if the student's IEP or Section 504 plan can be implemented at the choice school.

The parents of a student with disabilities (special education and Section 504), who attends a school other than their neighborhood school on a School Choice transfer, must provide their own transportation.

**Yes**  **No** Does the student currently receive special education (IEP) services, or is the student on a Section 504 plan?

**Yes**  **No** If the student is a preschool student, does he or she receive preschool special education services (IFSP)?

**Rules for Approved Transfers**

Parents will be responsible for transportation to and from school unless space is available on a district bus traveling to that school.

Once approved, a transfer will ordinarily remain in effect until the student completes the highest grade in the school, the student's parent requests that school choice be rescinded, or school choice is revoked from a neighborhood school.

When a student is promoted to a new level (from level K–5 to level 6–8 or from level 6–8 to level 9–12), the student will enroll in the school in the attendance area in which his or her parents reside unless a school choice request is submitted and approved. Students attending K–8 or K–12 alternative or language immersion schools will automatically be enrolled in the next level school. If the student rescinds enrollment in the alternative or language immersion school, a school choice request must be submitted and approved to remain in a school outside their attendance area. Applications (post-lottery) received after the deadline will be waitlisted and accepted as space allows.

**Your signature indicates you are a parent/guardian for this student and the above information is accurate.**

*I attest that the above information is accurate. I understand that falsifying information on this document could result in revocation of my student's transfer.*

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name of Parent/Guardian \_\_\_\_\_