

FORM A

SCHOOL CHOICE APPLICATION MONROE COUNTY SCHOOLS, FLORIDA

This form must be completed and returned to Monroe County School of Choice or the District School Board of Monroe County, Key West. The application is subject to annual review.

Home Zoned School _____

Student Name: _____
Last First Middle

Student's Date of Birth: _____
Month Day Year

Father's Name: _____ Telephone # _____

Address: _____

Mother's Name: _____ Telephone # _____

Address: _____

Name of Legal Guardian: _____ Telephone# _____

Address: _____

With Whom Does Student Live? _____

Address: _____
(If different from above)

2020-2021: Grade Level: _____ Sex: Female _____ Male _____

Ethnicity: (Check One) _____ White (Non-Hispanic) _____ Black (Non-Hispanic) _____ Hispanic

_____ Asian or Pacific Islander _____ American Indian or Alaskan Native _____ Multiracial

SCHOOL CHOICE

Please read the following information carefully:

Number the schools of choice within your region. For example, number 1 should be your first choice, 2 should be your second choice.

REGION 1 (LOWER KEYS)

_____ Gerald Adams Elementary

_____ Horace O'Bryant Elem/Middle

_____ Poinciana Elementary

_____ Key West High (Big Pine Area Residents only)

REGION 2 (MIDDLE KEYS)

_____ Sugarloaf Elem/Middle

_____ Marathon Middle/High

_____ Stanley Switlik Elementary

REGION 3 (UPPER KEYS)

_____ Key Largo Elem/Middle

_____ Plantation Key Elem/Middle

_____ Coral Shores High

_____ Full Time Virtual Instruction Program

*TRANSPORTATION TO OR FROM A CHOICE SCHOOL IS NOT PROVIDED UNLESS SPACE IS AVAILABLE ON AN EXISTING BUS ROUTE.

SIBLING PREFERENCE

List brothers or sisters you would like assigned to choice school, if space is available.

Choose one option: I choose to place all siblings together regardless of school

I choose to separate siblings if first choice is not available for all.

Name _____	Grade _____
_____	_____
_____	_____
_____	_____

I certify that the information provided on this application is true.

Parent/Guardian Signature: _____ Date: _____

TENTATIVE Approval or Disapproval by School Principal

- Approved. At this time, there is space available.
- Disapproved. At this time, there is not space available.
- Disapproved. Request is not in zone or region.

Principal Signature Date

THIS SECTION TO BE COMPLETED BY SCHOOL BOARD STAFF

Date _____

Application: Approved () Disapproved ()

On the basis of available space, in conjunction with a lottery system, the District School

Board for Monroe County, Florida assigns _____

to _____ School.

District School Superintendent

APPEAL PROCESS

Hardship cases can be appealed to the Regional School Choice Committee by submitting a request to any School in Monroe County, or to the District School Board of Monroe County, Key West.