STUDENTS

Fry 500 930

Petition for Early Enrollment Form

	STUDENT NAME		☐ FEMALE
	BIRTHDATE: 9/15/2012 AGE 4 GRADE LEVEL FOR	RTHE <u>17 - 18</u> SCH	OOL YEAR K
	PARENT/GUARDIAN NAME (Please Print)	4-04-	
	ADDRESS (Please Print)		
	CITY E 1. Zabethtown STATE KY ZIP	42701 COU	NTY Hardin
	TELEPHONE NUMBER (Home) (Work)		
	REQUEST PETITION FOR EARLY ENROLLMENT FOR WHICH SCHOOL	Danther J	\cademy_
	REASON(S) FOR REQUEST		
	teachers have told me numerous tir		,
	to be in head start. I'd like for 1		
	immediately and not have to wait		
	A Section of the sect	4/251	17
	Parent/Guardian Signature (Dat	e
			
	FOR DISTRICT USE ONLY		
	Date Received in Central Office 4/25/17		\rightarrow
	Requested school at or over cap size? Yes No		
	Request referred to School Principal for screening? Yes	□No	
	Child met Kindergarten Readiness Standards on District-app	proved screener?(Yes No
	Comments: Derformed AS "read	W" for Ki	nderporter
16	for the uncoming 2017-2018 V	elar.	will be.
UJ V	monitored closely for the fi	rst mont	to of school
\sim \mathcal{L}	ler policy. At the lend of the m	anth a fir	ral decision will.
- 1	PETITION FOR EARLY ENROLLMENT		Not Recommended
	Helly Graham	_ 5-18	1-17 delanin
	Paincipal Signature	Dat	e
	PETITION FOR EARLY ENROLLMENT	Approved \square	Not Approved
	Superintendent Signature	D-4	
	oupor intendent dignature	Dat	e
	Board Chair Signature	- P-	
	noute Chair Signature	-Dat	e