

SANDY VALLEY LOCAL SCHOOL DISTRICT  
5362 STATE ROUTE 183, N.E.  
MAGNOLIA, OHIO 44643

OPEN ENROLLMENT - LETTER OF INTENT  
SCHOOL YEAR 2023-2024

In accordance with current policy, students participating in the Open Enrollment Program will be given priority over new applicants for the upcoming school year.

In order to receive this consideration, please complete this form for each child and return to the Superintendent's Office at the above address to the attention of Sarah Leyda. This must be returned by **Monday, April 3, 2023**. IF YOUR ADDRESS HAS CHANGED, AND YOU ARE STILL LIVING OUTSIDE THE SANDY VALLEY DISTRICT, PLEASE PROVIDE PROOF OF RESIDENCY WITH THIS LETTER. Thank you.

STUDENT NAME \_\_\_\_\_

NAME OF PARENT/GUARDIAN(S) \_\_\_\_\_

PHONE \_\_\_\_\_  
HOME WORK

ADDRESS \_\_\_\_\_

RESIDENT DISTRICT \_\_\_\_\_ GRADE 2023-2024 \_\_\_\_\_

DOES YOUR CHILD HAVE AN IEP? \_\_\_\_\_  
YES NO

DO YOU HAVE OTHER CHILDREN IN OUR DISTRICT? \_\_\_\_\_  
YES NO

\_\_\_\_\_ I AM REAPPLYING FOR PARTICIPATION IN THE OPEN ENROLLMENT PROGRAM FOR THE UPCOMING SCHOOL YEAR FOR MY CHILD.

\_\_\_\_\_ I AM NOT INTERESTED IN HAVING MY CHILD PARTICIPATE IN THE OPEN ENROLLMENT PROGRAM FOR THE UPCOMING SCHOOL YEAR. I WILL BE WITHDRAWING HIM/HER AT THE END OF THIS SCHOOL YEAR.

\_\_\_\_\_ I AM INTERESTED IN ENROLLING MY CHILD AS A TUITION STUDENT FOR THE UPCOMING SCHOOL YEAR.

\_\_\_\_\_ I AM LIVING IN THE SANDY VALLEY DISTRICT AS OF \_\_\_\_\_(date). PLEASE PROVIDE PROOF OF RESIDENCY WITH THIS FORM.

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

IF ADDITIONAL INFORMATION IS REQUIRED, PLEASE  
CONTACT SARAH LEYDA AT (330) 866-3339.

Any person who knowingly makes a false statement is guilty of falsification under Section 2921.13 of the revised code which is a misdemeanor of the first degree.