



Superintendent of Schools
 94 North Elm Street, Suite 201
 Westfield, MA 01085
 Telephone: (413) 572-6403
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Mr. Stefan Czapowski
Superintendent of Schools

School Choice Application 2019-2020

On March 18, 2019, the Westfield School Committee voted to accept School Choice applications for students interested in attending the Westfield Public Schools under Massachusetts General Law, Chapter 76, Section 12B. Bus Transportation is **NOT** available to School Choice students.

The Westfield Public Schools will accept school choice students in the following grades: limited openings in kindergarten, grade 1 grade 2, and grade 4. Also, openings at Westfield Intermediate School, Westfield Middle School, and Westfield High School.

_____ Applying for Grade

_____ Today's Date

STUDENT INFORMATION:

Student's Name: _____
 Last First Middle Initial

Address: _____
 Street City/Town State Zip Code

Telephone: _____ Date of Birth: _____

School currently attending: _____ City/Town: _____ State: _____

Please select school applying for: ___ Westfield Intermediate ___ Westfield Middle ___ Westfield High
 ___ Kindergarten (Highland, Paper Mill) ___ Grade 1 (Highland) ___ Grade 2 (Highland, Paper Mill, Sth Rd) ___ Grade 4 (Paper Mill/Sth Rd)

Why do you wish to enroll your child in Westfield Public Schools? _____

Has your child been suspended or expelled in the last 2 years? ___ Yes ___ No
 If yes, when: _____ From what school: _____
 Reason: _____

Do you have another child attending Westfield Schools through School Choice? ___ Yes ___ No
 Name of student: _____ School: _____

PARENT/LEGAL GUARDIAN INFORMATION

Parent/Legal Guardian #1: _____
 Phone: _____ Address: _____ Email: _____

Parent/Legal Guardian #2: _____
 Phone: _____ Address: _____ Email: _____

By signing below, I certify that the above information is accurate and I understand any false statement or omissions may disqualify the applicant for consideration for enrollment and may be justification for immediate dismissal. Acceptance does not ensure enrollment. School Choice enrollment will not be finalized until all required forms and records (including health & academic records) have been received and reviewed (in accordance with MGS c71, §37L) from school for my child for the duration they are enrolled as School of Choice students, if accepted. I understand my child will not be eligible for consideration if he or she has been expelled from any other school.

_____ Signature of Parent/Guardian

_____ Date

Return application to: Superintendent's Office, 94 North Elm Street, Suite 101, Westfield, MA 01085

Westfield Public Schools does not deny student access to any educational program or other activity for reason of ethnicity, national origin, religion, age, sexual orientation, disability, race, or gender identity.