

COLDWATER EXEMPTED VILLAGE SCHOOLS
INTER-DISTRICT OPEN ENROLLMENT APPLICATION
2026–2027 SCHOOL YEAR
APPLICATION DEADLINE: April 1, 2026

Student Name: **Date:**

Parent/Guardian Name:

Address: **City:** **Zip:**

Email Address: **Phone:**

2026–2027 Grade Level: **Birth Date:**

Currently attend Coldwater via Open Enrollment? Yes No

Immediate family member open enrolled currently? Yes No

Are you a current staff member of Coldwater Schools? Yes No

District of Residence: **Requested District of Attendance:** Coldwater Schools

Does child have an IEP (or equivalent)? Yes No

Does child have special needs? Yes No **If yes, please explain:**

Has student been expelled or suspended from school? Yes No

My/our signature(s) indicate(s) awareness that completion of this application does NOT provide any permission to change district of attendance. It is merely a request to do so. I/we further understand that notice of approval or denial will be received no later than June 1.

My/our signature(s) indicate(s) that administrators of our district and the district where attendance is desired may exchange any and all information and records relative to my child.

SIGNATURES

Typing your name below constitutes a legally binding electronic signature.
You may also print, sign, and return this form.

Parent/Guardian Signature (type name): **Date:**

Parent/Guardian Signature (type name): **Date:**

SUBMIT COMPLETED FORM BY EMAIL (OPTIONAL):

Email the completed and signed form to: albers.amy@coldwatercavs.org