

Education Options – School Choice
CHRISTINA SCHOOL DISTRICT
Wilmington, Delaware 19801
SCHOOL CHOICE GOOD CAUSE FORM 2009-2010 SCHOOL YEAR
MUST ACCOMPANY 2009-2010 SCHOOL CHOICE APPLICATION

Name of Student _____ Current Grade _____

Address _____

School Currently Attending _____

Choice School Request _____

Home Phone _____ Business Phone _____

Please check (√) the “Good Cause” reason that applies and attach documentation to show the change occurred after January 14, 2009:

- _____ 1. **Change in the location of family residence** (required documentation includes a signed lease, signed and dated Settlement Statement or other document which **verifies the date** and location of the move.) **EFFECTIVE DATE OF MOVE:** _____
- _____ 2. **Change in the student’s parents’ marital status (Attach documentation)**
- _____ 3. **Change in legal guardianship (Attach documentation)**
- _____ 4. **Placement in foster care (Attach documentation)**
- _____ 5. **Adoption (Attach documentation)**
- _____ 6. **Participation in a foreign exchange program (Attach documentation)**
- _____ 7. **Student’s participation in a substance abuse or mental health treatment program (Attach documentation)**
- _____ 8. **Similar circumstances, such as change in childcare provider requires:**
 - The attachment of a letter from the provider that includes **the provider’s** address, certifies the child’s attendance at the childcare, and indicates the date the care started.

KINDERGARTEN PARENTS: I UNDERSTAND THIS CHOICE INVITATION IS FOR THE KINDERGARTEN PROGRAM ONLY AND, BASED UPON CURRENT SCHOOL CAPACITY, CHOICE WILL NOT BE AVAILABLE FOR FUTURE ATTENDANCE AT THIS SCHOOL.

Signature

Date

Please check ONE of the following: (Not Applicable for Kindergarten Parents)

_____ I would like this Choice request to continue until the end of the grade configuration.

_____ I am requesting Choice until the end of this school year, only.

I/We understand that transportation will only be provided from an existing Christina bus stop to the requested school and agree to abide by the School Choice Program Guidelines of the Christina School District.

Parent/Guardian Signature: _____

Date of Request: _____