

Policy Manual – Schools

S.03 Elementary School Students Out-of-Boundary Requests PROCEDURES

1. Parent(s)/guardian(s) requesting that a child be registered in an in-boundary school to an out-of-boundary school within the jurisdiction of the Board shall comply with the following requirements and/or conditions:
 - a. Submit a letter to the appropriate Superintendent for permission to enrol the child(ren) in an out-of-boundary school. The letter shall state the reason(s) for the request;
 - b. If such a request is received after staffing requirements have been established the Superintendent shall confer with the principal of the out-of-boundary school. Should space permit, and there are no other extenuating circumstances, the request may be approved;

In January of each year, the Planning and Accommodation department will provide the system, by way of a memo, a Colour Guide which classifies each school within one of three colour classifications that represent the degree of approval required for an Out-of-Boundary application.

- i) **Green Schools**: These schools are not currently experiencing any significant accommodation or development growth pressures. These schools are currently not part of a Boundary Review, Pupil Accommodation Review or Program Review and are not holding students for a new school. From an accommodation perspective, there is space to accommodate additional students.
- ii) **Yellow Schools**: These schools are currently at or approaching functional capacity (Building and Portable Capacity), and are not expected to experience significant development growth for the next five years. From an accommodation perspective, there is a moderate amount of space to accommodate additional students up to the current functional school capacity. For these schools, the admittance of additional students will not trigger any additional temporary accommodation or staffing but caution should be exercised when considering admittance of our-of-school boundary admissions.
- iii) **Red Schools**: These schools are currently experiencing, or expected to experience, significant accommodation and development growth pressures causing them to be at or exceeding functional capacity. These schools may also be currently part of a Boundary Review, Pupil Accommodation Review, Program Review or holding students for a new school. From an accommodation perspective, there is no space to accommodate any additional students.

- iv) Siblings of currently enrolled students are to be granted out-of-boundary admittance regardless of the colour classification of the school.
 - c. Should an out-of-boundary request be made for the first day of school in September, consideration of such a request shall not be granted until all in-boundary students have been accommodated; and,
 - d. At the beginning of a school year, decisions pertaining to out-of-boundary requests for Kindergarten admissions may be delayed to the end of September. Such admissions would be subject to the availability of space at the school.
-

ELEMENTARY SCHOOL OUT-OF-BOUNDARY ADMISSIONS FORM

IN BOUNDS OUT OF BOUNDS CATHOLIC NON-CATHOLIC

STUDENT INFORMATION

NAME OF STUDENT:				DATE OF BIRTH:	MM/DD/YYYY	
GRADE ENTRANCE:	SPECIAL EDUCATION NEEDS IDENTIFICATION:		<input type="checkbox"/>	<input type="checkbox"/>		
			YES	NO		
NAMES OF PARENTS/GUARDIANS:						
ADDRESS:					UNIT#	
CITY:					POSTAL CODE:	
PHONE NUMBERS:				EMAIL ADDRESSES:		
SCHOOL WITHIN BOUNDARY:	REQUESTED SCHOOL:				START DATE:	
CURRENT SCHOOL:						
STUDENT BAPTIZED CATHOLIC	<input type="checkbox"/>	<input type="checkbox"/>	PARENT/GUARDIAN BAPTIZED CATHOLIC	<input type="checkbox"/>	<input type="checkbox"/>	SUPPORTING DOCUMENTATION
	YES	NO		YES	NO	YES NO
RATIONALE FOR REQUEST:						
STUDENT HAS A SIBLING WHO IS CURRENTLY ENROLLED AT REQUESTED SCHOOL			YES <input type="checkbox"/>	NO <input type="checkbox"/>	IF YES, INDICATE THEIR CURRENT GRADE:	

CONDITIONS OF APPLICATION:

1. TRANSPORTATION IS THE RESPONSIBILITY OF THE PARENT(S)/GUARDIAN(S) FOR OUT OF BOUNDARY STUDENTS
2. THE FINAL DECISION IS NOT SUBJECT TO APPEAL

I/WE UNDERSTAND THE CONDITIONS OF THIS APPLICATION.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

FORWARD APPLICATION TO SUPERINTENDENT OF REQUESTED SCHOOL AT 90 MULBERRY STREET, HAMILTON, ON L8N 3R9

REQUESTED SCHOOL: APPROVED TO INITIATE SCHOOL INTAKE MEETING

NOT APPROVED

SUPERINTENDENT SIGNATURE: _____ DATE: _____

DISTRIBUTION

PARENT/GUARDIAN
REQUESTED SCHOOL
CURRENT SCHOOL