Northwood Local School District
600 Lemoyne Road, Northwood, OH 43619
Phone: 419-691-3888 Fax: 419-697-2470

Date& Time Received

Received By

SPECIAL OPEN ENROLLMENT APPLICATION 2026-2027

*Complete this application form and return it along with **all** supporting documents to the Board Office (700 Lemoyne Rd.) or email to nsmith@northwoodschools.org*

Student Information: (Please print clearly) **Grade in 2026-2027:____**

First Name | Middle Name | Last Name

Date of Birth | Gender | Street Address | City | Zip Code

School District of Residence: _____

Parent/Guardian Information: (Please print clearly)

Parent/Guardian #1

Name: _____

Cell Phone: _____

Email (required):_____

Parent/Guardian #2:

Name: _____

Cell Phone: _____

Email: _____

This Special Open Enrollment window offers two tentative start dates. Please select your preferred start date:
_____ Monday, December 7, 2026 _____ Tuesday, January 5, 2027

Has the student been suspended and/or expelled from any school during the 2025-2026 or 2026-2027 school year?
_____ No _____ Yes (If yes, please explain on back of this form)

Is the student receiving any of these services?
Special Education (ie. IEP): Yes ___ No ___ 504 Plan: Yes ___ No ___ Title 1: Yes__ No ___
(If you answered yes to any of these questions a current copy of the appropriate document(s) must be provided with the application per the Open Enrollment Guidelines.)

***New* Open Enrollee Applications must include:** (YTD = Year to Date)

Grades K-8 for 2026-2027 school year:	A copy of the student's current grade card that includes Q1 & Q2 grades and YTD attendance.
Grades 9-12 for 2026-2027 school year:	A copy of the student's unofficial transcript, progress towards graduation, grade card that includes Q1 & Q2 grades and YTD attendance.

Acceptance Conditions

I understand if my child is accepted into Northwood Local Schools, it is for the 2026-2027 school year only. This application may be revoked because of class/program size by resident students of Northwood and my child may need to transfer back to his/her home school, prior to the start of the school year or at the end of the school year.

_____ _____
Parent/Guardian Signature **Date**

My signature indicates that I have **read and understand the guidelines for open enrollment in the Northwood Local Schools and agree to abide by the procedures and policies that have been established.

DO NOT WRITE IN THIS AREA – FOR OFFICE USE ONLY

Approved _____ Denied _____ **SSID:**_____

_____ _____
Superintendent's Signature Date

Reason (If Denied): __ Suspensions exceeded Board Policy __ Unexcused absences exceeded Board Policy
__ Optimum number reached per Board Policy for grade/program __ Other:_____

No student shall be denied admission to the Northwood Local School District or to a particular course or instructional program or otherwise discriminated against for reasons of race, color, national origin, sex, handicap, or any other basis of unlawful discrimination.