

CROSS BOUNDARY APPLICATION – 2026 - 2027

Oak Ridge Schools
Oak Ridge, TN 37830

Please provide the following information and return the completed form to **Student Services**, School Administration Building, 304 New York Avenue, Oak Ridge, TN 37830. **You may email the form to artinker@ortn.edu and amoore@ortn.edu or by mail to: Oak Ridge Schools, Department of Student Services, Attention: Cross Boundary Applications, 304 New York Ave., Oak Ridge, TN 37830.**

We reserve the right to rescind any placement if enrollment significantly changes. If enrollment changes occur that will affect your child, you will be contacted by phone immediately. **IF the application is approved, transportation will not be provided by Oak Ridge Schools.**

Student's Name:			Home Phone:
Street Address:			Cell phone or email:
City:	County:	State:	Zip:
Legal Parent/Guardian Name:			Grade Entering:
Student's Date of Birth:	School Last Attended including Telephone #	School Requesting to Attend:	2 nd Choice:

Parent /Legal Guardian must submit the following documents with application for Cross Boundary:

- Student's most recent report card/progress report;
- Attendance record;
- Discipline record; and
- Documentation from current school administration stating student is currently in good standing.
- If high school, please attached current transcript.
- Parent Agreement Terms for Open Enrollment

Has the above named student required (or currently receiving) special education services? Yes, No or 504 services If yes, please explain: _____

Has the above named student had disciplinary/attendance problems at school? Yes No

If yes, check disciplinary measure(s) taken: Suspended Expelled other
Please explain: _

I have read the school's policy relative to tuition students and agree to the terms as stipulated. I understand tuition students are accepted only if student enrollment permits. I give permission to contact my child's former school to obtain addition information for approval of my child's application. By signing this form, you are acknowledging the above information to be true and accurate.

Signature of Parent/Legal Guardian

Date

For office use only: Application: Granted ____ Probationary ____ Denied ____ If denied, please state

reason(s): _____

Signature of Principal _____ Date _____

Signature of Student Services Executive Director _____

Date _____

The school system shall have the right to reject the application of any pupil who fails to meet satisfactory scholastic standards, or maintain satisfactory daily attendance, or maintain satisfactory behavior.

There shall be no obligation for the Oak Ridge Schools to provide transportation for Cross Boundary Students.

