

Notice of Intent to Enroll
In the Interdistrict Public School Choice Program for the 2020-2021 School Year

Due to the Choice District by January 6, 2020*

* Choice districts may accept late applicants, however late applicants will be considered only after those who applied by the deadline and only if choice seats are available.

Instructions:

For Parents of Accepted Choice Students:

1. Parents of students who will accept enrollment in the choice district must fill in this form and return it to the choice district **by January 6, 2020**, or as soon as possible after notification of acceptance by the choice district. *The form can be submitted to only one choice district.*
2. Transportation may not be provided for your student. Depending on the circumstances, the resident district may provide aid in lieu of transportation. Read the [transportation procedures](#) for more information.
3. Choice districts may set a deadline for registration for new choice students; if a newly accepted choice student does not register by the publicized deadline, then the district can revoke acceptance and notify the next applicant on the waitlist of conditional acceptance.

For Choice Districts:

The choice district must send a copy of each accepted Choice student's **Notice of Intent to Enroll** to the respective resident district **by January 17** or as soon as possible after receipt from parents to serve as notification.

Choice districts may set a deadline for registration for new choice students; if a newly accepted choice student does not register by the publicized deadline, then the district can revoke acceptance and notify the next applicant on the waitlist of conditional acceptance.

For Resident Districts:

This form serves as notification that this student has been accepted into a choice program in SY2020-21. *No action is required on your part, however you will be responsible for providing transportation if the student meets the eligibility requirements.* For information on the choice program and responsibilities of resident districts, visit the [choice website](#).

Notice of Intent to Enroll Form:

Date: _____

To: Dr. Debra Mercora
Superintendent
Lopatcong Township School District
321 Stonehenge Drive
Phillipsburg NJ 08865

As Parent or Legal Guardian of the student named below, I certify my student's intention to enroll in the Interdistrict Public School Choice Program in the Lopatcong Township School District in September 2020. I also grant permission to the Lopatcong Township School District to obtain all necessary student records from my student's district of residence.

Choice Student's Name:

Choice Student's Address:

Student's Current School (2019-20):

Student's Current District of Residence (2019-2020):

Student's Current Grade Level (2019-20120):

Signature of Parent/Guardian:

Printed Name of Parent/Guardian:

Address of Parent/Guardian:

Parent's Phone:

Parent's Email: