

## Odyssey Magnet School Intent to Enroll Form



Please print:	Date	
Name	Current Grade	
Address	Zip	
Current School	Male	Female
Phone (home)Phone (work)		
Email Address		
Parent/Guardian Name(s)		
Parent/Guardian Signature(s)		
Current math placement and teacher (grade level)Current ls the student currently receiving any special services, e.g., IEP, 504 plant		
If yes, what services are currently provided?		
Has your child been whole grade accelerated? Yes/When(Grad	le) No	
Does your child receive any other academic or social/emotional accomm	odations in the classroo	om? If so, please explain:
My child's name, address, and phone number can be published in the Oc Yes No  Are you interested in busing? Yes No  Please return by the last Friday in February to:		ory. asd.k12.wi.us OR
Cassie Guilbeault Mail to: 1545 E. Broadway Dr. Appleton, WI 54915		
The Appleton Area School District does not discriminate against stude origin, ancestry, creed, pregnancy, marital or parental status, sexual or physical, cognitive, emotional or learning disability in its education pro	rientation, gender ider	·
For Office Use Only		
Qualifications:		
In/Out of District:		