Date: March 13, 2017  
To: HSD and SSD Staff  
Re: Application for Enrollment for a Child of an Employee with Benefits  
From: Maxine Valdez

According to the Hazelwood School District Board Policy JECA, fulltime certified and support staff employees may be allowed to send their non-resident children to the District without paying tuition. If you would like to apply for enrollment, you will need to complete an enrollment application and send it to my office by April 28th. Completed applications will be processed in the order received; therefore it is imperative that you turn in your documents as soon as possible. School and Class Assignments will be made on a first come, first serve basis. You should receive information regarding your approval by June 30th from the assistant superintendents for education.

In addition, to be approved for the 2017-2018 school year, you must include a copy of each child’s birth certificate. If your child receives Special School District services, please include a copy of your child’s most recent Individualized Education Program as well. Please refer to Article 15, Fringe Benefits for the criteria to enroll your child. You will find this information on the District’s website in the HR Documents and Resources Section.

Applications that do not include birth certificates will not be processed. All applications must be submitted to the Office of Student Services no later than April 28, 2017.

If you need further information, please contact my secretary, Susie Chocho at 314-953-5065.
APPLICATION FOR ENROLLMENT FOR A CHILD OF AN EMPLOYEE WITH BENEFITS

Employee Information

Employee Name: ___________________________________________ Employee Number: __________________________

Employee’s Position: ___________________ Work Location: ___________________ Date of Hire: __________

Home Address: ______________________ City: _____________ Zip: __________

Are You Re-Applying for this benefit? □Yes    □No

District of Residence: ______________________ School of Residence: ______________________

Home/Cell Phone Numbers: __________________________ Work Phone Number: __________________

Employed by: □HSD    □SSD

Will Student(s) Require Special School District Services: □Yes    □No    If yes, please attach IEP.

Student Information

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Date of Birth</th>
<th>Relationship to Employee</th>
<th>Current Grade 2016-2017</th>
<th>Grade Entering 2017-2018</th>
<th>Requested School</th>
<th>School Assigned (for office use only)</th>
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- This approval will only be granted to current employees of HSD/SSD who receive benefits. If your employment status changes, your child/children will be allowed to remain at the current school(s) for the remainder of the school year only. You will need to make application for any subsequent years.
- If a child of a HSD/SSD employee requires special education services that are not currently implemented or based in the HSD, the child will be required to attend/return to his/her school district of residence.
- In accordance with Article 15 of the Teachers Articles of Agreement, the superintendent/assistant superintendent shall determine the school assignment.
- Transportation to and from school for the student is the responsibility of the employee.
- Students must comply with all rules, regulations and policies of the Hazelwood School District.
- This approval must not interfere with the employee’s work schedule, availability for overtime and/or extra duty.
- After a decision is made, you will receive email notification and a copy will be sent to the school assigned.
- This approval will be valid for one school year. Application shall be made annually and sent to the Office of Student Services by the deadline date. If an employee is hired after the deadline date, he/she will be given thirty days to submit a request. No exceptions to the deadline requirements will be made.

I have read the above and agree to the terms

REQUESTED BY: ___________________________________________ Date: __________________________

Employee’s Signature

APPROVED BY: ___________________________________________ Date: __________________________

Superintendent/Assistant Superintendent Signature

Copies: Student Services Department and Student File

2/28/17 Revised