



1. Submit the following documentation required by the State Board of Education:
 - APPLICATION FORM – Please be sure to complete the entire application.
 - CONSENT FOR STUDENT RECORDS RELEASE – A parent/guardian must sign a consent form that allows Highlands Community Learning center to request the student's records from the previous school attended.
 - PROOF OF RESIDENCY – Must be a utility bill, (gas, electric or water) a copy of a current lease or mortgage statement only.
 - BIRTH CERTIFICATE – A copy of the student's birth certificate. A copy of a baptismal certificate, passport or naturalization papers are acceptable in lieu of a birth certificate.
 - TRANSCRIPT – Please provide transcripts for students in grades 9 through 12. If this is the first year for a 9th grader they will not have one yet.
 - IMMUNIZATION HISTORY – Under the Ohio Revised Code, the parent or legal guardian is required to submit written evidence that his/her child has had all the required immunizations. It is the parent's or guardian's responsibility to furnish this information. An exemption form will be made available for those parents who have elected not to have their children receive the immunizations. Your child will be withdrawn if immunization records are not received within 14 days of enrollment date.
 - COPY OF CUSTODY ORDER OR DIVORCE DECREE – (if applicable) – Under the Ohio Revised Code, proof of custody MUST be presented for any student for which custody has been determined by a court. Please provide adoption papers or other guardianship documents. If you have had a recent name change, please provide the appropriate documentation for that as well.
 - SPECIAL NEEDS DOCUMENTATION – (if applicable) – Please provide a copy of the most recent Individualized Education Plan (IEP) and Multi-factor Evaluation (MFE) or ETR.
 - FREE AND REDUCED LUNCH FORM – If you do not qualify, please complete with N/A and sign.
 - TITLE 1 FORM – Please complete and sign.
 - PLEASE NOTE – Signatures are required on Part II of the application.

Applications and necessary documentation must be mailed or faxed to Highlands Learning Center

Mailing Address:

Highlands Community Learning Center
6909 Smoky Row Road
Columbus, OH 43235

Local Phone: (614) 210-0830
Fax Phone: (614) 210-7201

2. Attend an orientation session prior to beginning school:
 - An enrollment specialist will contact you regarding the dates and times of the orientation sessions, once a completed application has been received. These sessions will be held throughout the year.

ENROLLMENT FORM

Student Information

please print

Child's Name: _____
Last First Middle

Address: _____

Date of Birth: _____ Age: _____ Sex: _____ Entering Grade _____ this year

Last Grade Completed in June: _____ at _____
School City or County State

Previous school attended: _____

Race: _____

District of Students Residence: _____

Is this child a Ward of the State? Y / N Mothers Maiden Name: _____

City in which student was born: _____

Student Lives with: Mother Father Both Parents Guardian

Person with legal custody: Mother Father Both Parents Guardian

Brothers _____ Sisters _____

Parents'/Guardian Information

Name: _____ Relationship: _____

Street Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Name: _____ Relationship: _____

Street Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Particular Health conditions of the child to be considered

In case of Emergency Contact

1) _____
Name Relationship Address Phone

2) _____
Name Relationship Address Phone

3) _____
Name Relationship Address Phone