

ATTENTION HERON HEIGHTS & PARK TRAILS ELEMENTARY PARENTS:

Elementary students residing within the revised combined boundary of Heron Heights and Park Trails Elementary Schools (west of University Drive) who are not currently attending their desired school may indicate their preference by submitting a Choice Option Area application to **Heron Heights Elementary, Park Trails Elementary or Riverglades Elementary.**

The Office of School Choice will assign all elementary students within the revised combined boundary to Heron Heights Elementary, Park Trails Elementary or Riverglades Elementary, based on parent preference, priorities and available space.

Siblings will be guaranteed placement in the same school, and priority will be given to place students with siblings at the school they are currently attending. Existing geographic priority areas for Heron Heights and Park Trails Elementary Schools, not impacted by the boundary change, will be maintained.

Transportation will be provided as applicable and may include additional depot bus stops.

To indicate preference, parents may submit the one page application form included in this packet.

Each applicant must have a Broward County Public Schools student identification number in order to indicate school preference. If your child is not currently enrolled in a Broward County Public School, please go to either Heron Heights Elementary or Park Trails Elementary school to obtain a student identification number. **This must be done prior to completing a Choice Option Area application.**

If your child already attends a Broward County Public school and your address has changed, please update your residential address at your child's current Broward County Public School before completing your Choice Option Area application. **This must be done prior to completing a Choice Option Area application.**

Notification letters will be emailed to the email address on file for the applicant.

Students applying to kindergarten must be 5 years old by September 1, 2020.

Email, fax, mail or hand deliver to:

Office of School Choice
600 SE 3rd Avenue, Fort Lauderdale, FL 33301
Email: schoolchoice@browardschools.com
Fax: (754) 321-2489



Choice Option Area Application
Heron Heights/Park Trails Combined Elementary Boundary
With Choice to Riverglades

2020/21
School Year

IMPORTANT INFORMATION - PLEASE READ BEFORE COMPLETING THIS APPLICATION

School assignment will be based on space availability, guaranteeing that siblings will be able to attend the same school. The educational program needs of the incoming child may impact school placement. Geographic priority will be based on the 2013/14 Heron Heights Elementary and Park Trails Elementary school boundaries. After the priority placements stated above, all remaining available seats will be filled on a first come, first served basis.

Student Identification Number #	Student Date of Birth	Gender	Application Grade (KG - 5)
<input type="text" value="0"/> <input type="text" value="6"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="text"/> <input type="text"/> <input type="text"/>
Student's Last Name		Student's First Name	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

(Student's present address and telephone number must agree with the school information on file. If you moved or have a different phone number, you MUST contact Heron Heights Elementary or Park Trails Elementary with the correct information BEFORE sending in this form.)

Race

<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African-American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Hispanic or Latino? Yes <input type="checkbox"/> No <input type="checkbox"/>
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Student Address (No P.O.Box)	Bldg/Apt#
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
City	State Zip
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SIBLING INFORMATION IS REQUIRED WHEN: the applicant has a sibling currently attending the requested school or is applying to the same requested school. *A separate application must be submitted for each sibling applying.*

Check the most appropriate option below:

- Applying student has a sibling that will continue to attend the requested school during the 2020/21 school year.
- Applying student has a sibling that is also applying to the requested school for the 2020/21 school year.

Sibling's Identification Number #	
<input type="text" value="0"/> <input type="text" value="6"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Sibling's Last Name	Sibling's First Name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Indicate the Choice Option Area preference for the 2020/21 school year by marking an "X" in one of the boxes below:

- I would like for my child to attend **Heron Heights Elementary School**
- I would like for my child to attend **Park Trails Elementary School**
- I would like for my child to attend **Riverglades Elementary School**

By signing this document I confirm that I am the parent/legal guardian on file at the student's current school. I certify that all information contained herein is true and accurate and I understand that providing false information may result in the denial or rescindment of any school placement. I agree to support and follow the Unified Dress Program, individual school discipline plan, Policy 5004.1, and the Student Code of Conduct.

Parent/Legal Guardian Last Name	Parent/Legal Guardian First Name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Primary Email address to receive status notifications via email	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	@ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Secondary Email address to receive status notifications via email	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	@ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Primary Phone	Secondary Phone
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Parent/Legal Guardian Signature: _____ Date: _____

Email: schoolchoice@browardschools.com; fax: (754) 321-2489; mail or hand deliver to:
 Office of School Choice, 600 SE 3rd Avenue, Fort Lauderdale, FL 33301