



Fax or Email completed application to: Zones of Choice Office (213) 241-4108 | zoc@lausd.net

Please complete ALL sections and PRINT CLEARLY. Incomplete applications may not be processed.

Form with fields for: Last School Attended, School District, What state if outside of California?, What country if outside of USA?, Type of School, 2019 – 2020 Grade Level, Student Name, Date of Birth, Parent / Legal Guardian Name, Home Address, Primary Telephone No., Alternate Telephone No., Is the student a foster child?, Is the student homeless?, Does the student receive Special Education services (has an IEP)?, If student has a sibling enrolled at one of the schools below, would you like them assigned at the same school?, If yes, name of school, Grade Level, Sibling's Name.

SCHOOL SELECTION IN ORDER OF PREFERENCE

INSTRUCTIONS: Please select schools in order of preference using numbers from 1 – 15— every option box should contain a number. EXAMPLE: #1 = first choice, #2 = second choice, etc.

For additional information, visit <http://achieve.lausd.net/zoc> and read the Belmont Zone of Choice brochure for complete details about each of the schools.

Table with 4 columns: Option # (1-15), School Name, Campus Location, Type of School. Lists various schools like Academic Leadership Community School, Academy of Educational Empowerment: Medicine, etc.

Parent / Legal Guardian Signature

Date

IMPORTANT NOTE: Once a student has been assigned to a school and received confirmation from the Zones of Choice Office, the parent / legal guardian must go to the school to complete enrollment.

School Use ONLY
School Name:
Date Faxed: