501.3.4 Kindergarten Out-of-Boundary Application for Admission

To Parents of Out-of-Bounds Students:

Thank you for your interest in registering your child in one of our Lethbridge School District No. 51 Kindergarten Programs. We are pleased to provide excellent programs and services for our Kindergarten students. Since you have chosen to seek admission to a Kindergarten program outside of your child’s attendance area (neighbourhood school), it is important that you are fully informed as to the District policy regarding school choice.

Under District Procedure 602.1.2 for Kindergarten:

“In-boundary students have priority in programs. Out-of-boundary students must apply for admission (form 501.3.4) and may be admitted based on the decision of the principal.”

- Since in-boundary students have priority, you are strongly encouraged to register your child in your neighbourhood school’s Kindergarten program.
- If you choose to register your child as an out-of-boundary student, your application cannot be accepted until the principal has determined whether the school has the resources needed to accommodate your child. For example, if a principal finds that a Kindergarten program is full, out-of-boundary students will not be accepted.
- Please note that this decision may not be made until 5 instructional days after the school year has begun as families may move during the summer and numbers of registered students may change. Your child’s registration will not be official until you have received notification from the school principal indicating whether or not your child has been accepted.

If your child cannot be accommodated as an out-of-boundary student, it can be very unsettling to have to find another program on short notice. Therefore, registering your child in his/her neighbourhood Kindergarten program is advised.

Student Name: __________________________     _________________________     _______
            Last     First    Initial
Address: ____________________________________________________________________
Phone No.: _____________________________     __________________________________
            Home     Cellular
Reason for Request:

Parent Signature: ______________________________  Date: _________________________

Date: ________  Time: __________