



Email complete Applications to: Reutherreg@kusd.edu

Enrollment Application

Student Name _____ Cohort year _____ Today's Date _____

Student ID _____ Address _____
 Street _____ City _____ Zip _____

Parent/Guardian Name _____ Parent/Guardian Phone Number _____

Student D.O.B. _____ Student Age _____ Parent/Guardian Email Address _____

Why do you want to attend Reuther? _____

Who do you know that attends Reuther? _____

What are your hobbies? _____

Do you have a job? Yes____ No____ If so where? What hours do you typically work? _____

Student Educational Information

Name and address of school currently or last attended: _____

Current Grade _____ Please check the following if they apply to you: _____ Special Ed. _____ Bilingual/ELL _____

Counselor _____ Have you attended Reuther before? Yes _____ No _____

Please fill in the chart below, and be honest! This will help us place you in the right program.

Classroom Strengths	Classroom area in need of development

Is there anything else you would like us to know about you? _____

Parent/Guardian Signature

Student Signature

The Kenosha Unified School District No. 1 is Equal Opportunity Educator/Employer with established policies prohibiting discrimination on the basis of age, race, creed, religion, color, sex, national origin, disability or handicap, sexual orientation, or political affiliation in any educational program, activity, or employment in the District. The Superintendent of Schools/designee (262-359-6320) addresses questions regarding student discrimination, and the Executive Director of Human Resources (262 359-6333) answers questions concerning staff discrimination.



Guidance Office - Informal Records Request

Today's Date: _____

To: _____ Fax #: _____

Student: _____ Date of Birth: _____

Reuther Central High School is a KUSD Choice School with an apply, interview, and records review process before acceptance. Our goal is to ensure that Reuther is the right fit for each student. The parent/guardian is aware of this process and has given permission below. The above named student should not be withdrawn from your school until a determination is made. If accepted and enrolled, a Formal Request for Records will be submitted.

I hereby authorize _____ (insert name of current school) to disclose by any means (including written, oral or electronic means) the information indicated below to Reuther Central High School of the Kenosha Unified School District.

Please communicate this information to Florinda (Linda) Ruffolo, Registrar, at 262-359-6134 or via fruffolo@kusd.edu

- Unofficial Transcript
- IEP or 504
- Attendance
- Behavior Records
- Immunization Records

Purpose of Disclosure: The information is requested for educational programming and determination services regarding Reuther Central High School. This information is required for our interview and placement process. Students accepted into the program will be notified through a Formal Request for Records.

Acknowledgement: Receive Records & Authorization - I understand that I have a right to a copy of the records that are disclosed and a right to a copy of this authorization.

Withdrawal of Authorization: I understand that I have the right to revoke this authorization, except to the extent that disclosure has already been made in reliance on this authorization.

This permission is valid for two months from the date signed. A copy of this authorization is as effective as the original. I certify that I am the parent, legal guardian, personal representative of the above named student, or that I am the student and of majority age, and have the authority to sign this release.

Parent/Guardian Signature: _____ Date: _____

Print name of Parent/Guardian _____ Print Name _____ Relationship to Student _____

Linda Ruffolo
Administrative Support/Registrar
262-359-6134
fruffolo@kusd.edu