VARIANCE REQUEST FORM 2023-2024 School Year



Future Ready. Community Strong.

Use this form to request your student attend a school in ONE91 other than your school of residence. If approved, parent/guardian is responsible for transportation. A decision will be communicated after the lottery process is held on the 5th of each month. The variance process can be viewed on the district website at https://www.isd191.org/

Variance requests do NOT need to be completed annually; only when the student's **address or school changes** (i.e.: elementary to middle school.)

Submit one form I	per student to: ONE 91	Enrollment Center, 200 We	est Burnsville Pkwy, Burnsville, MN 55337	
	rollmentcenter@isd191.org			
Fax to: 95	2-707-4181			
Student Informa	tion:			
Name (first, middle	e, last)			
Requested Grade_		Date of Birth		
Parent / Guardia				
Name (first, middl	e, last)			
Street Address				
APT/Unit #	City		Zip Code	
Home / Cell Phone				
School of Residence /	Currently Attending	School Requested	Requested Start Date	
Reason for Requ	est:			
To sever my student's current variance and return to our school of residence.				
To remain at the school my student is currently attending.				
Student has sibling who currently attends the requested school.				
Student has a parent who works at the requested school.				
Stude	nt has child care in the neight	orhood of the requested scl	hool.	
High	School supplemental cours	ecourse requested:		
Other	:			
Parent / Guardian	Signature		Date	
For Office Use O	nly: Student ID#	Approved	d Denied	
Synergy Updated	I On:	Variance Code	Variance Code Removed	
Authorized Signa	ture		Date	