

Non-Resident Enrollment
Application

Name of receiving school district: _____ No. _____

I have read the guidelines on Non-Resident Student(s) enrollment and hereby request that my son/daughter be permitted to attend _____
(name of receiving school)

1. Parent/Guardian Name _____

2. Parent/Guardian Address _____

Home Phone: _____ Work Phone: _____

3. Applicant Student's Name _____

Date of Birth _____

4. School Student is presently attending _____

Grade _____

5. Present school address _____

6. Has the student ever been suspended or expelled from school? Yes _____ No _____
If yes, describe the circumstances including dates and duration:

7. Reason(s) for requesting attendance in this school.

8. Special instructional programs in which the applicaft child is currently enrolled.
(For example: Vocational, Foreign Language, Remedial, Special Education,
Gifted/Talented, etc.)

9. Special instructional programs that the applicant child expects to enroll in during the
coming school year.

10. Transportation arrangements that will be made.

*Any student who is involved in a level 3, 4, or 5 offense (Policy 502.10) may
immediately have their waiver pulled. All students who come to the district on a waiver
are entitled to due process to verify accuracy of disciplinary referral.*

*I am the legal guardian for this student and will provide documentation to verify this
(Power of Attorney will also be accepted).*

Parent's/Guardian's Signature

Date

- Approved
- Disapproved

Superintendent's Signature

Date