

# Non-Resident Enrollment Application

School District \_\_\_\_\_

School Year \_\_\_\_\_

Student Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

District You Live Within \_\_\_\_\_ This request is a:  Renewal  New

Applicant

District & Building Student Currently Attends \_\_\_\_\_

Student's Birthdate \_\_\_\_\_ Grade \_\_\_\_\_ Desired Date for Enrollment \_\_\_\_\_

Does student have brothers/sisters enrolled in this district? If yes, list name, school, grade \_\_\_\_\_

Reason for changing school districts (please check appropriate box/boxes)

Social  Technology  Academic  Fine Arts  Other: \_\_\_\_\_

Please indicate if this student has been:

Suspended District: \_\_\_\_\_ Date/Reason: \_\_\_\_\_

Expelled District: \_\_\_\_\_ Date/Reason: \_\_\_\_\_

Truant District: \_\_\_\_\_ Date/Reason: \_\_\_\_\_

Optional: To ensure continuity of service, please indicate below services currently provided for your child:

Special Education  Gifted/Talented  Remedial Help  ESL  Other \_\_\_\_\_

## Please review this information and sign below:

- This district does not discriminate on the basis of race, color, disability, religion, gender, or national origin.
- The district reserves the right to limit enrollment based on capacity of buildings or programs as well as failure of applicant to meet any special requirements for entry into its buildings or programs. The district will evaluate applicants on the basis of previous attendance, behavior, and academic performance. Enrollment may be denied to a student who has been suspended or expelled from their previous district or to a Special Education student wishing to enroll under Section 105c Schools of Choice for whom a written cooperative agreement regarding costs cannot be obtained with their district of residence.
- If transportation is desired, it may be possible for your child/children to be picked up at a scheduled stop near your home. However, this procedure or the scheduled stops could change on an annual basis.

**I understand the above limitations and certify that the information provided on this application is true and complete to the best of my knowledge. I understand the district enrollment requirements that pertain to my student.**

Parent/Guardian Signature (or student if 18 years old) \_\_\_\_\_ Date \_\_\_\_\_

## District Use Only below this point

### Student Enrollment Status

\_\_\_ Enrollment Approved

Building \_\_\_\_\_

Grade \_\_\_\_\_

Notified \_\_\_\_\_

(Note: If Sec 105c Sp Ed Student, an agreement has been executed with the resident district)

\_\_\_\_\_  
Authorized Signature Date

\_\_\_ Enrollment Denied (Reason)

### Non-Resident Category (MSDS Code) For this Student

\_\_\_ Section 105 Schools of Choice (02)

\_\_\_ Section 105c Schools of Choice (03)

\_\_\_ Resident District Release \* (06)

\_\_\_ Other (06)

### Resident District Release (Required Annually)

\_\_\_ Resident District Release

This student is released for enrollment into another school district.

\_\_\_\_\_  
School District Releasing

\_\_\_\_\_  
Authorized Signature Date