

St. Francis Area Schools

4115 Ambassador Boulevard NW, St. Francis MN 55070
763-753-7040 • www.isd15.org

Nonresident Agreement

To be completed by student's parent/guardian.

Student's Last Name		First Name		Middle Initial	School Year	Grade
Student's Birthdate (Month/Day/Year)				Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		
Student's Address (Include apartment/lot number)				City		Zip Code
Parent/Guardian Last Name		First Name		Middle Initial	Phone(s) H: () W: () C: ()	
Parent/Guardian Address (If different from Student's Address)				City		Zip Code
Reason this transfer is requested						
SERVING School District Name (The district you wish to attend) St. Francis Area Schools St. Francis, Minnesota		District Number 15	School Student Would Attend	Date Student Moved (Month/Day/Year)	Has student been receiving Special Education Services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
RESIDENT School District Name (The district you live in)		District Number	School Most Recently Attended	SIGNATURE OF PARENT/GUARDIAN		
				X _____ The above information is true and correct to the best of my belief and knowledge. Date _____		
FOR DISTRICT USE ONLY				Reason Code		
Type of Transfer <input type="checkbox"/> 1. Agreement between school boards, enrollment exceptions. M.S. 120.0752, Subd 1-2: Transfer requires the approval of both districts; the resident district first. (Code 11) <input type="checkbox"/> 2. Continued enrollment of 11th and 12th grade students. M.S. 120.0752, Subd 3: Transfer requires the approval of the non-resident district only. (Code 04) <input type="checkbox"/> 3. High school graduation incentives. M.S. 126.22; Transfer requires the approval of the non-resident district only unless the student resides in Minneapolis, St. Paul or Duluth. If residing in Minneapolis, St. Paul or Duluth, the resident district must first approve, the non-resident district second. (Code 03)				Effective Date of Transfer (Month/Day/Year)		
				Expiration Date of Transfer (Month/Day/Year)		
NON-RESIDENT/SERVING DISTRICT APPROVAL/DISAPPROVAL				<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		
X _____ Date _____ Signature of Superintendent /Responsible Authority						
RESIDENT DISTRICT APPROVAL/DISAPPROVAL				<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		
X _____ Date _____ Signature of Superintendent /Responsible Authority						