LUDLOW INDEPENDENT SCHOOLS

Nonresident Student Application

Pre-application Instructions to Parents/Guardians: Please read prior to completing and submitting this form.

- Nonresident students will only be considered if there is adequate space in their particular grade level and/or there is no undue impact on the programmatic needs of the School/District
- Assuming space is available, cases will be considered for acceptance based on the following criteria:
  - Satisfactory academic progress and academic effort as determined by the principal
  - Meet the attendance policies of the district, including matching the district's average attendance.
  - Behave in accordance with the expectations of the Student Code of Acceptable Behavior and Discipline.
  - Parents/Guardians are cooperative and supportive in their working relationship with the school.
- If approved, this commitment is for one school year. A new application must be submitted each year.
- **Renewal of Nonresident enrollment may be denied on the following:**
  - Failure to abide by any of the criteria listed above related to academic effort/performance, attendance, behavior, and cooperative and supportive relationship.
  - Failure to pay school fees and/or tuition fees in advance of the school year

Date of Request: _____ For School Year: _____

Student's Name: _____ _____ _____
Last *First* *MI*

Home Address: _____ Phone: _____

Present District/School: _____ Present Grade: _____

Reason for Transfer: _____

Name of Parent/Guardian: _____

NOTICE:

1) Transfers involving athletics will be in accordance with Kentucky High School Athletic Association (KHSAA) By-Laws.
2) Requests for transfer for middle and high school students are considered incomplete until class scheduling information has been submitted to the prospective school.

I UNDERSTAND THAT, IF APPOVED, THIS ASSIGNMENT WILL BE GRANTED FOR ONLY ONE (1) SCHOOL YEAR AND THAT ANY TRANSPORTATION NEEDED IS THE RESPONSIBILITY OF THE PARENT/GUARDIAN.

_____ _____
Parent/Guardian's Signature *Date*

TO BE COMPLETED BY CENTRAL OFFICE PERSONNEL

Application	☐Approved	☐Disapprove	Date: _____
Parent/Guardian Contacted	☐Yes	☐No	Date: _____
Present School Contacted	☐Yes	☐No	Date: _____

Professional recommendation, if required: _____

_____ _____
Superintendent/Designee's Signature *Date*