

FRANCIS HOWELL SCHOOL DISTRICT  
801 Corporate Centre Drive, O'Fallon, MO 63368  
Phone: 636-851-4076 / Fax: 636-851-4090

**BOUNDARY EXCEPTION REQUEST**

Assignment of students in attendance areas other than their own is discouraged. Requests will be considered when a student is presented with sufficient obstacles that would impair success at the school in their attendance area. Requests will be approved **only** if this need exist.

**Please note:**

- **Transportation services will not be provided** if students attend outside their designated attendance area.
- **NEW for 2022-2023 School Year:** All boundary exceptions must be renewed annually. Due to capacity concerns, the district cannot guarantee the same placement in subsequent years. There is also **not** a guarantee that incoming siblings will be approved.
- Boundary Exceptions will not be approved for athletic reasons. If a request is submitted for another reason and it is discovered it was for athletic reasons, the approval will be immediately revoked.

**COMPLETE FORM AND SUBMIT TO:** Kaylee Terry – [kaylee.terry@fhsdschools.org](mailto:kaylee.terry@fhsdschools.org)

Student is currently on a Boundary Exception

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

ID Number \_\_\_\_\_ Student's Current Grade \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home School Attendance Area \_\_\_\_\_ Requested School \_\_\_\_\_

Parent(s) Name \_\_\_\_\_ Phone (C) \_\_\_\_\_ (W) \_\_\_\_\_

Parent(s) Email \_\_\_\_\_

**Statement of Parent:**

I request that the above-named student be reassigned to a school out of their regular attendance area for the current or upcoming school year. Reasons for desiring a special assignment are as follows: (attach additional pages if necessary) **Note: Attach all supporting documents/statements from appropriate professional personnel** (school, medical, social, psychological, etc...).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURES OF PARENT/GUARDIAN ARE REQUIRED**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

**FOR DISTRICT USE ONLY**

Attendance \_\_\_\_\_ Behavior \_\_\_\_\_ Grades/GPA \_\_\_\_\_

Approved  Denied  Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_

School Notified \_\_\_\_\_ Parent Notified \_\_\_\_\_ Departmental Initials \_\_\_\_\_