

## STUDENT ATTENDANCE AGREEMENT (FP-14.2)

### FOSTER OR GROUP HOME PLACEMENT BY STATE AGENCY/COURT

#### School Year 20\_\_ - 20\_\_

#### SECTION I: TO BE COMPLETED BY OFFICIAL OF STATE AGENCY/COURT

I request that the following student be allowed to attend a school district outside the student's district of residence:

Student Name (last, first, middle initial)		Birthdate
<b>ADDRESS OF FOSTER/GROUP HOME</b>	Student Address	
<i>Complete one of the following using the District of Residence determination on page 2:</i>		
<b>PARENTAL RIGHTS NOT TERMINATED</b>	Parent Address	
<b>PARENTAL RIGHTS TERMINATED</b>	Address of Court	
<b>PLACING AGENCY</b>	Name of Agency	
	Name of Caseworker	Phone Number
	Agency Address	
<b>SIGNATURE</b>	Signature of Official of State Agency/Court _____ Date: _____	

#### SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	Student Grade
District of Choice/Placement	District of Residence
Individual Making Request Court State Agency	Student Placement Group Home Placement Foster Home Placement
Enrollment Start Date	Annual Pupil Instruction Days

#### SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

NO TRANSPORTATION will be provided.

<b>Transportation Provided by District of Choice/Placement</b> Bus Service at No Cost Bus Service, charging ____ District of Residence \$_____ per _____ (attach payment schedule) Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) Mileage reimbursement under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)
<b>Transportation Provided by District of Residence</b> Bus Service at No Cost Mileage reimbursement under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)

**SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT**

Type of Agreement (Enter the annualized tuition rate for each section)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
Foster/Group Home Placement	_____ \$ _____ (District of Residence)	_____ \$ _____ (State of Montana)	\$ _____ (Total)

**SECTION V: AGREEMENTS AND SIGNATURES**

<i>Transportation and tuition will be charged as indicated in Sections III and IV.</i>	
<b>A. DISTRICT OF CHOICE/PLACEMENT</b>	
The Board of Trustees:	
_____ APPROVES this Student Attendance Agreement	
_____ DISAPPROVES this Student Attendance Agreement	
Board Chair _____	
Signature _____ Date: _____	
<b>B. DISTRICT OF RESIDENCE</b>	
The Board of Trustees:	
_____ ACKNOWLEDGES receipt of this Student Attendance Agreement	
Board Chair _____	
Signature _____ Date _____	

**District of Residence Determination (check one or more of the following):**

<input type="checkbox"/>	The residence of the minor’s parents
<input type="checkbox"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="checkbox"/>	If neither parent has legal custody, the residence of the legal guardian or custodian appointed by a court of competent jurisdiction
<input type="checkbox"/>	The district of residence for a child following the termination of parental rights is the physical location of the district court that ordered the termination in accordance with 40 Opinion Attorney General No. 69 at 277 (1984).
<input type="checkbox"/>	If there are questions concerning legal residency, consult with the agency responsible for the child’s placement in the district.
<input type="checkbox"/>	In the case of a controversy, the district court has jurisdiction over residence