



Non-Resident Student Application Form

Please complete the information requested below and return to the school where you are requesting enrollment for your child(ren). You will be informed whether your child(ren)'s application has been accepted, if your child(ren) has (have) been placed on a waiting list pending available capacity, or if the application has been rejected. Applications will be considered in accordance with the District's admission standards and out of county enrollment policies.

Child's Last Name _____ First Name _____

Date of Birth _____ Age _____ Current Grade _____

Parent/Legal Guardian Name _____

Residential Address of parent/ person with legal custody _____
City State Zip

School of Residence _____ County of Residence _____

Home/Cell Phone _____ Email Address _____

Has your child been expelled from another school or district?
 YES NO

Did your child accumulate 5 or more unexcused absences during the previous year?
 YES NO

How many total days did your child miss school last year? _____

Has your child ever failed to be promoted from one grade level to another?
 YES NO

Reason(s) for request: *(Check all that apply)*

Near childcare provider

Sibling(s) of child previously attended
 Sibling Name _____
 Sibling Name _____
 Sibling Name _____

Near work

Continuing Transfer *(child enrolled previous years)*

Other _____

I understand the following Houston County Board Policy for a non-resident student:

- Transportation will not be provided for my student.
- Principals have the authority to revoke transfers due to population growth and/or student discipline/attendance violations.
- Approval is contingent on space availability for the school/grade level program.
- Full tuition must be paid prior to attending school.
- Approval does not constitute a permanent transfer. Out of county requests must be renewed and paid yearly.

Signature of Parent/Legal Guardian _____ Date _____

(SCHOOL USE ONLY)

Student may enroll upon payment of tuition.

Principal Signature _____

(BOE USE ONLY)

Tuition Paid: _____ Date: _____

Received by: _____

*****RETURN FORM TO PRINCIPAL TO COMPLETE ENROLLMENT*****