



ELDER GROVE SCHOOL NONRESIDENT STUDENT ENROLLMENT APPLICATION

**TO BE COMPLETED BY PARENT/GUARDIAN OR OFFICAL OF STATE AGENCY/COURT
FILL OUT A SEPARATE FORM FOR EACH STUDENT**

Parent/Guardian Name: _____

Address: _____ Zip: _____

Phone: _____ Email: _____

STUDENT INFORMATION

I request that the following student be allowed to attend Elder Grove School District #8, for the 2024 - 2025 School Year.

STUDENT NAME	DOB	GRADE	DISTRICT OF RESIDENCE	CURRENT SCHOOL

Answer all of the following questions:

1. Will special education services be requested? This includes an IEP OR 504. Yes____ No____
If yes, list: _____
2. Has the above-named student been expelled or suspended from a former school? Yes____
No____ If yes, explain: _____
3. Does the above-named student have a criminal record? Yes____ No____
If yes, explain: _____
4. Has the above-named student been absent for more than 10 days in a semester at any former school? Yes____ No____ If yes, explain: _____

Please give a specific reason why this request is being submitted:

Please attach: 3 years of grades, attendance records, behavior reports, birth certificates, immunization records and FP-14

Application will not be considered complete without attachments

Parent/Guardian Signature: _____ Date: _____

FOR DISTRICT USE ONLY

Date application was received: _____ Time application was received: _____

Signature of school personnel accepting application: _____

Stamp application here:

FOR SCHOOL USE ONLY:

Yes No **Was info entered into Google Form?**

DATE: _____

Yes No **Was application complete?**

DATE: _____

- FP-14
- 3 Years of grades
- Attendance records
- Behavior Records
- Birth Certificate
- Immunization record

APPLICATION CONTIGENT UPON:

1. Children of District Employee
2. Previously enrolled children
3. Children with siblings who have previously enrolled the prior year as nonresident student

ADDITIONAL COMMENTS:

FOR SCHOOL USE ONLY:

APPROVED DENIED DATE: _____

SUPERINTENDENT SIGNATURE

COMMENTS:

APPROVED DENIED DATE: _____

SCHOOL BOARD CHAIRMAN SIGNATURE

COMMENTS:

APPEAL REQUESTED: Yes No

By: _____ Date: _____

Comments:

OUT-OF-DISTRICT ATTENDANCE AGREEMENT (FP-14.1)

School Year 2024 - 2025

SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN

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
Parent/Guardian Address (physical)	
Student Address (group home only)	
Parent/Guardian Signature (or Group Home Manager, in Place of Parent/Guardian) This agreement will be returned to the parent/guardian if accepted by the district of choice. The agreement will specify the costs, if any, such as transportation and other fees for which the parent/guardian may be charged. If the student attends under this agreement, the parent/guardian agrees to pay the applicable costs under the terms of this agreement. Signature of Parent/Guardian _____ Date: _____ Contact Phone Number _____	

SECTION II: TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Student State ID	Student Grade
District of Attendance	District of Residence
Individual Making Request <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> District	Student Placement <input type="checkbox"/> Group Home Placement <input type="checkbox"/> District to District Placement
Enrollment Start Date	Annual Pupil Instruction Days

SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Transportation may be determined per, 20-5-320(2)(b), MCA:

- Transportation is provided by the parent/guardian;
- Transportation can be provided by agreement of the district of residence and the district of attendance; or
- Transportation is discretionarily provided by the district of attendance.

Select one of the following:

Transportation Provided by Parent/Guardian <input type="checkbox"/> No transportation will be provided by the district of residence or the district of attendance. Parent/guardian will provide transportation
Transportation is Discretionarily Provided by the District of Attendance <input type="checkbox"/> Bus Service at No Cost <input type="checkbox"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="checkbox"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
Transportation Provided by Agreement of the District of Residence and the District of Choice <input type="checkbox"/> Bus Service at No Cost <input type="checkbox"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="checkbox"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)

SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Type of Agreement (Check one and indicate the annual amounts of Regular Education, Special Rate and Total Annual Tuition)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
<input type="checkbox"/> Parent/Guardian Request			
<input type="checkbox"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Student lives closer to school of choice and at least 3 miles from resident district school AND District of Residence does not provide transportation	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	\$ _____	\$ _____	\$ _____

Type of Agreement (Check one and indicate the annual amounts of Regular Education, Special Rate and Total Annual Tuition)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
<input type="checkbox"/> Group Home Placement	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> District to District Placement	\$ _____	\$ _____	\$ _____

SECTION V: AGREEMENTS AND SIGNATURES

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

SECTION VI: DISTRICT OF RESIDENCE

District of Residence Determination 1-1-215, MCA (check one):

<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 (not a foster parent).
<input type="checkbox"/>	The district of residence for a child following the termination of parental rights and before a permanent placement is accomplished is the physical location of the district court that ordered termination.
<input type="checkbox"/>	The district of residence of a child whose custodial parent is incarcerated is the school district where the custodial parent resided prior to incarceration.
<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 controversy, the district court has jurisdiction over residence.