



**WHITE PLAINS CITY SCHOOL DISTRICT  
FAMILY INFORMATION CENTER  
17 Amherst Place  
White Plains, NY 10601  
(914) 422-2038**

**OUT-OF-DISTRICT TUITION WAIVER REQUEST 2025-26**

The undersigned requests that \_\_\_\_\_ be permitted to enroll in the White Plains City School District for the 2025-26 school year. This waiver must be received by December 1, 2024. It may be scanned and emailed to [familyinformationcenter@wpcsd.k12.ny.us](mailto:familyinformationcenter@wpcsd.k12.ny.us); include *Tuition Waiver Request* in subject line.

It should be understood that this waiver will be granted only if there is room in a particular school and grade. The district will not grant this tuition waiver if it would require additional staffing, additional costs, or displace services to be provided to students who are residents of White Plains. **If the granting of this waiver adds additional costs, the district may admit the student but require the staff member to reimburse the district for these expenses.**

**PLEASE COMPLETE THE FOLLOWING:**

STUDENT DATA	FAMILY DATA
Date of Birth:	Name of Employed Parent:
Current Grade:	Employee Email:
Current School:	Name of Parent 2:
School Address:	Address:
School Telephone:	

Please list below the reason(s) why you want to enroll your child in the WPCSD:

Applicant: \_\_\_\_\_  
 Received: \_\_\_\_\_  
 Reviewed: \_\_\_\_\_  
 Approved: \_\_\_\_\_

Date: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Date: \_\_\_\_\_