Application for Enrollment by Paying Tuition

Name of Parents: _____

Current Address: _____

Current Phone: _____

Student _____ Grade _____

Student _____ Grade _____

Student _____ Grade _____

Declaration of Impending Move into District

I am seeking enrollment for my child(ren) in the Swallow School District effective on _____. We are in the process of moving into the district and anticipate achieving residency by _____

New Address (within the Swallow School District):

_____

_____

_____ _____

Signature of Parent or Legal Guardian Date

Attachments – Please list:

_____

_____