Helena School District #1
K-12 STUDENT OUT-OF-DISTRICT TRANSFER REQUEST

Today's Date_____

INSTRUCTION TO PARENTS / GUARDIANS:

This form, in addition to the **Out-of-District Attendance Agreement** (FP-14.1), must be completed by the parents or guardians of any student who is seeking to enroll in the Helena Public Schools and who currently resides outside of the Helena Public Schools attendance area and/or is attending school in another District.

Please complete this form and include a copy of the student's academic, attendance, and behavior records for the past three years. Submit the completed form and accompanying documents to the Helena School District Assistant Superintendent at the Lincoln Center, 1325 Poplar St, Helena, MT 59601. Upon receipt of the form and records, the Assistant Superintendent or designee will review the student's attendance, academic standing, behavior, etc. and approve or deny the request based on the student's standing. Students who are not in "good standing" in their current district may not be accepted.

Students Name (Last, First, MI) _____Parent/Guardian: _____
Phone Contact: Cell:_____Work: _____ Home: _____
Email_____Street Address:_____City:_____
Current School:_____Current Grade:_____
Requested School: _____ Grade at Transfer:_____
Desired Date of Transfer: _____

Reason(s) for requesting this change in schools: (Attach any supporting documentation.)

_____

_____

_____

_____

This application must also include a copy of attendance and behavioral records for the last three (3) years. Your application will not be considered complete until all documents are received. (Please check the boxes below to indicate which documents are attached.)

_____ Academic Records (e.g. report card, transcript, etc.)

_____ Attendance Records

_____ Behavior Records

_____ Special Education Records (if applicable)

_____ Other (please explain) _____

Activities in which the student will participate if transfer is approved:

_____

_____

I have read the policy and procedures as provided on this form and agree to the conditions

_____ _____

Parent/Guardian Signature Date

To be filled out in District office:
Date Received in Assistant Superintendent's Office_____

Approval by Assistant Superintendent: Yes_____ No _____ Date:_____

Assistant Superintendent Signature_____

Assistant Superintendent Comments:

_____

_____

_____

BOARD POLICY AND ADMINISTRATIVE PROCEDURE:

Helena School District **School Board Policy 3025**

STUDENTS

Discretionary Nonresident Student Attendance Policy

The Board, recognizing that its resident students need an orderly educational process and environment, free from disruption and overcrowding, hereby establishes criteria for the discretionary admission of nonresident students. The District will screen all nonresident students and consider only those who meet the criteria set forth in this policy. The Superintendent will recommend to the Board any nonresident student admission in accordance with this policy. Foreign exchange students shall be admitted pursuant to the terms of this policy and according to current federal law regulating foreign exchange programs.

The District will consider the following criteria for discretionary admission of nonresident students: the student's academic record, disciplinary record, including truancy records, and the current student enrollment in the class in which the student would be admitted.

The Superintendent or designee will not admit any student prior to viewing that student's records from the student's previous school districts. The Superintendent or designee will evaluate the student based on the above listed criteria and determine whether or not to recommend the admission of the student. The Superintendent or designee will not admit any nonresident student who is serving a suspension or expulsion in another school district or who has been recommended for suspension or expulsion.

All resident students who become nonresident students due to a move by the students' parents from the District may continue attendance for the semester, barring registration in another school district. At the completion of the semester, the student must apply for admission as a nonresident student if the student wishes to remain in the District.

The Board reserves the right to charge tuition for nonresident students. The Board may, in its discretion, charge or waive tuition for all students whose tuition is required to be paid by one type of entity. Unless otherwise provided by law, nonresident students are not eligible transportees for school transportation services.

Legal References:	§ 20-5-320, MCA	Attendance with discretionary approval
	§ 20-5-323, MCA	Tuition and transportation rates
	10.10.301B, ARM	Out of District Attendance Agreements

Cross References:

Policy History:
Adopted on: 2.12.2013
Revised on:

Helena School District **Administrative Procedure 3025P**

Discretionary Nonresident Student Attendance Procedure

Boundary lines set by the Board of Trustees shall be observed unless an exception is granted through guidelines established by the Superintendent.

Approved transfer requests carry the following conditions:

1. The parent/guardian must provide transportation to and from school.
2. The District will determine the placement of any out-of-district student accepted for enrollment.
3. Out-of-District transfers will be subject to review each year in order to ensure that all students and policies are being met.
4. The District reserves the right to have students return to the school of residence if overcrowding results in the receiving school or there is need to balance enrollments.
5. The student who transfers is subject to the eligibility policies established by the Montana High School Association.
6. A student requesting a transfer from outside the Helena School District must be in good standing in their current school. The criteria include, academic standing, behavior, attendance, etc.
7. Tuition fees will be applied based on Board Policy.

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

School Year 20__ - 20__

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. Printed Name of Parent/Guardian_____ 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 ☐ Parent/Guardian ☐ District	
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 ☐ No transportation will be provided by the district of residence or the district of attendance. Parent/guardian will provide.
Transportation is Discretionarily Provided by the District of Attendance ☐ Bus Service at No Cost ☐ Bus Service, charging parent/guardian $_____ per _____ (attach payment schedule) ☐ 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 ☐ Bus Service at No Cost ☐ Bus Service, charging ☐ parent/guardian **or** ☐ District of Residence $_____ per_____ (attach payment schedule) ☐ Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)

SECTION IV: AGREEMENTS AND SIGNATURES

A. DISTRICT OF ATTENDANCE

The Board of Trustees:

_____ APPROVES this Out-of-District Attendance Agreement

_____ DISAPPROVES this Out-of-District Attendance Agreement (Provide explanation in Notes)

Board Chair _____

Signature _____ Date: _____

B. DISTRICT OF RESIDENCE

The Board of Trustees:

_____ ACKNOWLEDGES receipt of this Out-of-District Attendance Agreement*

_____ APPROVES this Out-of-District Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination 1-1-215, MCA (check one):	
☐	The residence of the minor's parents.
☐	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody.
☐	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).
☐	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.
☐	The district of residence of a child whose custodial parent is incarcerated is the school district where the custodial parent resided prior to incarceration.
☐	If there are questions concerning legal residency, consult with the agency responsible for the child's placement in the district.
☐	In the case of controversy, the district court has jurisdiction over residence.

**** Tuition rates determined in accordance with 20-5-323, MCA.***

Notes:

English

Student Residency Questionnaire

Student Residency Questionnaire (Required by Federal and State Law)

Name of Student: _____ Date of Birth: _____
(mm/dd/yyyy)

Person completing form:

- ☐ Parent or guardian
- ☐ Youth
- ☐ Unaccompanied youth (a youth that does not live with a parent or guardian)
- ☐ Other: _____

Name: _____

Email: _____ Phone: _____

Please answer these questions about the student's residency. The information you provide is confidential and protected by the law called the Federal Education Rights and Privacy Act. We use this information to decide which schools students should attend. We also use this information to make sure the rights of a child, youth or an unaccompanied youth are met based on a law called the McKinney-Vento Homeless Assistance Act.

1. Is the student's address a temporary living arrangement? ☐ Yes ☐ No
2. Is the student's living arrangement due to loss of housing or financial hardship? ☐ Yes ☐ No

If the answer to any of the above is YES, please complete the following: Where is the student identified above currently living? (Please check one)

- ☐ In a motel or hotel due to loss of housing or financial hardship
- ☐ In an emergency shelter, transitional housing facility, or abandoned in a hospital
- ☐ Sharing another family's house or apartment
- ☐ In a car, park, trailer park (this does not refer to a mobile home (trailer) park, this refers to a type of camping ground for fifth wheel camper trailers or other types of movable campers), camping ground, street, public space, substandard housing (housing that does not meet modern standards of living), or abandoned building
- ☐ In a bus or train station
- ☐ Moving from place to place (couch surfing)
- ☐ In a public or private place not meant to be used as a regular place for people to sleep
- ☐ Other: _____

Last school the student attended:

School: _____ District: _____

City: _____ State: _____

Name of Parent, Guardian or education decision maker:

Name _____ Signature: _____
Name _____ Signature: _____
Address: _____
City: _____
Home Phone: _____ Work Phone: _____
Cell Phone: _____ Email: _____

OR

Student (if an unaccompanied youth that is homeless):

Name _____ Signature: _____
Address: _____
Email: _____ Phone: _____

If a child, youth or unaccompanied youth is NOT living in permanent housing, proof of residency and other documents (health, school records, etc.) normally needed for enrollment are NOT required. The child, youth or unaccompanied youth must be enrolled immediately in his or her school of origin, the school where other children attend that is in the area where the student is currently living, or another school that the student may attend based on what is best for the student.

OFFICE USE ONLY			
Date Completed:	Eligible: ☐ Yes ☐ No	District Representative:	Comments:

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Spanish

Student Residency Questionnaire

Cuestionario sobre la residencia de los alumnos (Obligatorio según la ley federal y estatal)

Nombre del/la alumno(a): _____ Fecha de nacimiento: _____
(mm/dd/aaaa)

Persona que completa el formulario:

☐ Padre/madre o tutor ☐ Joven sin compañía (alguien que no vive con su madre/padre/tutor)
☐ Joven ☐ Otro: _____

Nombre: _____

Correo electrónico: _____ Teléfono: _____

Responda estas preguntas sobre la residencia del/la alumno(a). La información que usted brinde es confidencial y está protegida por la Ley Federal de Derechos Educativos y Privacidad Familiar (Family Educational Rights and Privacy Act). Utilizamos esta información para decidir a qué escuelas deberían asistir los alumnos. También utilizamos esta información para garantizar que se cumplan los derechos de un/una niño(a), joven o joven sin compañía de conformidad con la Ley McKinney-Vento de Asistencia a Personas Sin Hogar (McKinney-Vento Homeless Assistance Act).

1. ¿La dirección particular del/la alumno(a) corresponde a una vivienda temporal? ☐ Sí ☐ No
2. ¿El/la alumno(a) reside en esta vivienda debido a la pérdida de su hogar o a dificultades económicas? ☐ Sí ☐ No

Si la respuesta a cualquiera de las preguntas anteriores es SÍ, complete lo siguiente:

¿Dónde vive actualmente el/la alumno(a) antes identificado(a)? (Marque una opción).

☐ En un motel u hotel debido a la pérdida de vivienda o dificultades económicas
☐ En un albergue de emergencia, centro de acogida de transición o se encuentra abandonado en un hospital
☐ Comparte la casa departamento de otra familia
☐ En un automóvil, un estacionamiento, un estacionamiento de casas remolque (esto no hace referencia al estacionamiento de casas móviles (remolques), sino que se refiere a un tipo de campamento para remolques de cinco ruedas u otros tipos de casas móviles), un campamento, la calle, un espacio público, una vivienda por debajo del estándar (que no cumple con los estándares de vida modernos) o en un edificio abandonado
☐ En una estación de autobús o de tren
☐ Se traslada de un lugar a otro (se vale de la hospitalidad de conocidos)
☐ En un espacio público o privado que no está equipado como lugar regular en el que se pueda dormir
☐ Otro: _____

Última escuela a la que asistió el/la alumno(a):

Escuela: _____ Distrito: _____

Ciudad: _____ Estado: _____

Nombre del padre/madre, tutor o persona responsable de la decisión educativa:

Nombre _____ Firma: _____
Nombre _____ Firma: _____
Dirección: _____
Ciudad: _____
Teléfono de casa: _____ Teléfono del trabajo: _____
Teléfono celular: _____ Dirección de correo electrónico: _____

O

Alumno(a) (si se trata de un/una joven sin compañía ni hogar):

Nombre _____ Firma: _____
Dirección: _____
Correo electrónico: _____ Teléfono: _____

Si un/una niño(a), joven o joven sin compañía NO vive en una residencia permanente, NO se requieren pruebas de residencia ni otros documentos que normalmente se solicitan para la inscripción (información de salud, registros escolares, etc.). El/la niño(a), joven o joven sin compañía debe inscribirse de inmediato en su escuela de origen, la escuela a la que otros alumnos asisten y que se encuentra en el área en la que vive actualmente, u otra escuela a la que pueda asistir según lo que sea de su conveniencia.

OFFICE USE ONLY			
Date Completed:	Eligible: ☐ Yes ☐ No	District Representative:	Comments:

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