

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46

3. Has your child been expelled or suspended from a former school? Yes ___ No ___
4. Does your child have a criminal record? Yes ___ No ___
5. Has your child been absent for more than 10 days in a semester at any former school district? Yes ___ No ___

BY SIGNING THIS APPLICATION, I AM ACKNOWLEDGING THAT I KNOW AND UNDERSTAND THAT THE DISTRICT MAY INVESTIGATE THE STUDENT'S RECORDS AND HISTORY IN DETERMINING ELIGIBILITY FOR POSSIBLE ADMISSION TO DISTRICT SCHOOLS. FURTHER, I GIVE PERMISSION FOR EXAMINATION OF ANY AND ALL RECORDS OR DOCUMENTS SO PERTAINING.

Signature of Parent/Guardian *Date*

** Completion of this application does not ensure the applicant will be admitted to Gardiner Public Schools. Please make any appropriate arrangements in the event the applicant is ultimately not admitted.*

FOR DISTRICT USE ONLY

Date application postmarked _____

The Application for Out-of-District Attendance is: ___ **Approved**
___ **Not Approved**

Reason for Non-Approval:

Superintendent's Signature *Date*

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 2023 - 2024

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 after acceptance by the district of choice and will specify the costs, if any, which will be charged to the parent/guardian for attendance. If the student attends under this agreement, the parent/guardian agrees to pay the costs, if any, charged to the parent/guardian under the terms of this agreement.	
Signature of Parent/Guardian: _____ Date: _____	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	Student Grade
District of Choice/Placement	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
Enrollment Start Date	Annual Pupil Instruction Days

SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

NO TRANSPORTATION will be provided. Parent/guardian will transport at own expense (Go to Section IV)

Transportation Provided by District of Choice/Placement <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 \$ _____ (attach payment schedule) <input type="checkbox"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="checkbox"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)
Transportation Provided by District of Residence <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)

SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

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)
Parent/Guardian Request			
<input type="checkbox"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="checkbox"/> Mandatory – Elementary student to attend where high school age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<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"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="checkbox"/> Mandatory– Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="checkbox"/>	<input type="checkbox"/> \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="checkbox"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged as indicated in Sections III and IV.

A. DISTRICT OF CHOICE/PLACEMENT
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 Board Chair: _____
 Signature: _____ Date: _____

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement
 Board Chair: _____
 Signature: _____ Date: _____

District of Residence Determination (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"/>	In the case of controversy, the district court has jurisdiction over residence

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.

