

TROY SCHOOL DISTRICT NO. 429
REQUEST FOR ADMISSION BY NON-RESIDENT STUDENT

Name: _____
 First Middle Last Date: _____

Birthday: _____ Sex: _____ Class/Grade: _____

Address: _____
 PO Box/Street City State Zip

Telephone: _____

Name of Parent or Guardian: _____

Occupation or Employer: _____

Address, if different from students: _____

Telephone, if different than students: _____

Names of Schools Previously Attended:

<u>Schools</u>	<u>Years Attended</u>	<u>Grade Completed</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TO: APPLICANT AND PARENTS:

The criteria to be utilized in considering requests of out-of-district students for admittance to Unified School District No. 429 is as follows:

1. An evaluation of the validity of the reasons for requesting admittance.
2. A background of good attendance in previous schools.
3. A background of good citizenship in previous schools.
4. Certification, on the part of parents, of willingness to work constructively and continuously with school officials in a joint home/school effort to assist the student.

If this request to attend USD 429 as an out-of-district student is approved, the approval is only valid while the student meets the expectations and standards of the district. If student behavior or academic performance should not meet the high expectations of USD 429, the privilege to attend school will be immediately withdrawn.

Request for Admission by Non-Resident Student

Information required to consider application for admittance is as follows:

1. Were you a member in good standing in the last school attended:
Yes _____ No _____ If the answer is no, why?

2. Did you have disciplinary difficulty in your previous school?
Yes _____ No _____ If the answer is yes, please explain the nature of the difficulty.

3. Did you have a good attendance record in your previous school?
Yes _____ No _____ If the answer is no, please indicate the reasons for poor attendance.

4. Please list courses enrolled in last semester and your grades:

5. Kansas Assessment Scores from Spring _____.

Reading _____

Math _____

6. List your reasons for desiring to attend USD 429.

7. List any unusual circumstances regarding your request you feel should be given consideration.

Date Request Submitted: _____

Signature of Student: _____

Signature of Parent or Guardian _____

Request for Admission by Non-Resident Student

Request for admission of out-of-district students will be reviewed on a year-to-year basis. The privilege to attend school as an out-of-district student in this district will be immediately withdrawn if the student does not meet expected standards of academic performance and student behavior. Long term continuance as a student in the Troy Schools shall be contingent on compliance with the criteria enumerated in this application.

USD 429, Doniphan County, Troy, Kansas, is an Equal Opportunity Employer and does not discriminate on the basis of sex, race, religion, color, or national origin in employment, educational programs or other activities which it operates.

_____ Approved

_____ No Approved

Building Principal

Date

_____ Approved

_____ Not Approved

Superintendent of Schools

Date

_____ Approved

_____ Not Approved

Board of Education

Date