

ANACORTES SCHOOL DISTRICT #103
 2200 "M" AVENUE
 ANACORTES, WA 98221
 (360) 293-1200 FAX (360) 293-1222

APPLICATION FOR ATTENDANCE IN NON-RESIDENT DISTRICT

SECTION I. (COMPLETED BY PARENT/GUARDIAN - PLEASE PRINT)

Student's Full Name:		Birthdate:	Telephone:
Street Address:		City:	Zip:
School Year applying for:	Student grade level (for year applying):	Last school district attended and name of school:	

I hereby request that the above student be permitted to attend school in the _____ SCHOOL DISTRICT for the school year listed above for the following reasons:

DOES STUDENT RECEIVE SPECIAL EDUCATION/SPECIAL PROGRAM OR RELATED SERVICES ____YES ____NO

It is understood that we, as parents, must assume responsibility for adequate transportation and supervision to and from school. We also certify that we have read and agree to the terms of School District Board policy relating to the admission of non-resident students. We understand that our non-resident student will be accepted only if there is adequate space to accommodate and that this acceptance will be revoked if our student exhibits disruptive behavior or attendance problems. We understand that this agreement is for one school year only and that WE MUST RENEW OUR APPLICATION YEARLY.

Parent/Guardian Name (please print):	E-Mail Address:
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 SIGNATURE OF PARENT/GUARDIAN DATE

SECTION II. (COMPLETED BY RESIDENT DISTRICT)
RESIDENT DISTRICT AGREEMENT TO "WAIVE" ATTENDANCE

Having examined the circumstances and facts stated above and agreeing that the student will be best accommodated by the non-resident district, this district hereby agrees to waive attendance for the above school year only.

APPROVED

DENIED

SIGNATURE FOR THE BOARD OF DIRECTORS DATE

SCHOOL DISTRICT NAME & NUMBER

SECTION III. (COMPLETED BY NON-RESIDENT DISTRICT)
NON-RESIDENT DISTRICT AGREEMENT TO "ACCEPT" STUDENT

Agreeing that the student will be best accommodated by the non-resident district, this district hereby agrees to accept the student beginning:

_____ 20____ and ending _____ 20_____.

APPROVED

DENIED

SIGNATURE FOR THE BOARD OF DIRECTORS DATE

SCHOOL DISTRICT NAME & NUMBER