

Edwardsburg Public Schools
69410 Section Street – Edwardsburg, MI 49112
269-663-3055 – Phone
269-663-6485 – Fax
www.edwardsburgpublicschools.org

Out of State Tuition Form
Non-Resident Students Requesting Enrollment into
Edwardsburg Public School District
2018-2019

To enable a non-resident tuition student to enter/continue at **Edwardsburg Public Schools**, advanced approval of the following persons must be obtained:

1. Superintendent of receiving school district
2. Building administrator of receiving district
3. Parent or guardian of student, if applicable

(Please fill in form completely and print clearly)

Student's Name: _____ Date of Birth: _____

Parent's Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

City: _____ State: _____ Zip: _____

School district of residence: _____ Phone: _____

School currently attending: _____ Phone: _____

Reason for request: _____

School desired in Edwardsburg Public School district: _____

GRADE STUDENT ENTERING 2018-2019: _____

SIBLING(S) APPLYING/CURRENTLY ATTENDING (please circle):

Name: _____ Grade: ____ Name _____ Grade: ____

Has student ever been **EXPELLED** from school?

YES NO

If YES, how long? _____

State reasons: _____

Does student have a criminal record?

YES NO

If YES, state offense: _____

Name of county and court which has jurisdiction: _____

Sentence: _____

Is student currently under court jurisdiction?

YES, on probation. How long? _____ NO, not currently on probation.

SERVICES

Does/Has this student receive(d) special education programs, services or accommodations?

YES NO

If YES, please explain briefly: _____

IN THE EVENT OF ANY DISCIPLINE AND/OR ATTENDENCE ISSUES, EDWARDSBURG PUBLIC SCHOOLS RESERVES THE RIGHT NOT TO RENEW THIS AGREEMENT FOR THE SUBSEQUENT SCHOOL YEAR.

MY SIGNATURE INDICATES ALL INFORMATION PROVIDED IS TRUE AND ACCURATE. I AM AWARE IF INACCURATE OR FALSE INFORMATION IS SUBMITTED THAT IT MAY RESULT IN THE APPLICATION BEING DENIED. **MY SIGNATURE ALSO INDICATES THAT I WILL ASSUME ALL FINANCIAL RESPONSIBILITY FOR MY STUDENT.**

Parent or Guardian signature

Date

Student signature, if legal age

Date

For Office Use Only

APPROVED DENIED

Building Administrator

Date

Superintendent, Edwardsburg Public Schools

Date

The Board of Education does not discriminate on the basis of race, color, religion, national origin, sex, disability, age, height, weight, marital status, or any other legally protected characteristics, in its programs and activities, including employment opportunities.

If any person believes that the Edwardsburg Public Schools District or any of the district's staff has inadequately applied the principles and/or regulations of Title II, Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment Act of 1972, Section 504 of the Rehabilitation Act of 1973, The Age Act and The Americans with Disabilities Act, s/he may bring forward a complaint to the district's Civil Rights Coordinator, Edwardsburg Public Schools, 69410 Section St., Edwardsburg, Michigan 49112 (269-663-1048).