

STUDENT ATTENDANCE AGREEMENT (FP-14)

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)			
Walker, Jardon Stor			
Birthdate 1-10-08			
Student Address P. D. Box 28 East Glacin			
Parent/Guardian Address			
Rona King			
Individual Responsible for Placement			
Javes with both gran	docents & mother		
Relationship to Student	Phone Number		
Grandmother	845-3627		
Agency Responsible for Placement:			
Address (include city, state and zip code):			
Parent Signature			
	ceptance by the district of choice and will specify the costs if any		
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.			
	1 10 22		
Signature of Parent/Guardian:	Date: 4-11-19		
State Agency/Court Request OR Group Home Representative Si	gnature		
Signature of Official of State Agency/Court/Group Home:	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	Student Placement		
Parent/Guardian	Group Home Placement		
Court	Foster Home Placement		
☐ State Agency	District to District Placement		
Enrollment Start Date	Annual Pupil Instruction Days		
CECTION III TRANSPORTATION TO SECOND			
SECTION III: TRANSPORTATION – TO BE COMPLETED BY			
NO TRANSPORTATION will be provided. Parent/guar	rdian will transport at own expense (Go to Section IV)		
Transportation Provided by District of Choice/Placement			
☐ Bus Service at No Cost ☐ Bus Service, charging ☐ parent/guardian OR ☐ District of Residence \$ per			
Bus Service, charging State of Montana \$per year (or	ver-schedule costs only – attach documentation of costs)		
☐Mileage reimbursement to the parent/guardian under a TR-4 is	ndividual Transportation Contract (3 miles from school/bus stop)		
Transportation Provided by District of Residence	, 3001		
Bus Service at No Cost			
Bus Service, charging parent/guardian \$per	(attach payment schedule) Individual Transportation Contract (more than 3 miles school/bus stoo)		
LIMITER REPORT FOR THE PROPERTY OF THE ALL PROPERTY OF THE ALL			



SECTION IV: TUITION COSTS - TO BE COMPLETED BY DI	STRICT OF CHOICE	/DI ACENATAIT	
(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 Tuitior (Regular Education Rate + Special Rate)
Parent/Guardian Request Discretionary – Parent/Guardian requests to enroll student outside District of Residence	Tuition Waived		\$(Parent/Guardian)
Mandatory – Elementary student to attend where high school age sibling(s) attends	Tuition Waived		\$(Parent/Guardian)
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	Tuition Waived	s	\$(District of Residence)
Mandatory – Geographic barrier prohibits attendance in District of Residence	Tuition Waived	s	\$(District of Residence)
State/Court Placement (includes foster and group home placements) District to District Placement	s	<u></u>	\$(State of Montana)
SECTION V: AGREEMENTS AND SIGNATURES	Tuition Waived	s	\$(District of Residence)
The Board of Trustees: APPROVES this Student Attendance Agreement DISAPPROVES this Student Attendance Agreement Board Chair: Signature: Signature: APPROVES this Student Attendance Agreement (only reof Residence) DISAPPROVES this Student Attendance Agreement ACKNOWLEDGES receipt of this Student Attendance Agreement The District of Residence Of Paraget Functions and the District Of Paraget Functions and th	reement (only if no tra	n and/or tuition is to	
the District of Residence OR parent/guardian or state is response			
Signature:		Date:	
The Superintendent of Public Instruction: ACKNOWLEDGES receipt of this Student Attendance Agreement	ıt		
OPI Representative:			
Signature:		Date:	



Transportation Provided by District of Residence

☐Bus Service, charging parent/guardian \$_

☐ Bus Service at No Cost

STUDENT ATTENDANCE AGREEMENT (FP-14)

School Year 20___ - 20___

SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN - OR - OFFICIAL OF STATE AGENCY/COURT 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) ocha u-Birthdate Student Address 20122 Parent/Guardian Address 54mil out about Individual Responsible for Plagement TESSICA Anal Relationship to Student Parents Agency Responsible for Placement: Address (include city, state and zip code): **Parent Signature** 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: State Agency/Court Request OR Group Home Representative Signature Signature of Official of State Agency/Court/Group Home: 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 Student Placement ☑ Parent/Guardian ☐ Court Group Home Placement ☐Foster Home Placement ☐State Agency ☐ District to District Placement **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 ☐ Bus Service at No Cost ☐ Bus Service, charging ☐ parent/guardian OR ☐ District of Residence \$_ (attach payment schedule) oer ☐ Bus Service, charging State of Montana \$______ per year (over-schedule costs only — attach documentation of costs) Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)

per.

Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)

(attach payment schedule)



Signature: ___

SECTION IV: TUITION COSTS - TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT **Total Annual Tuition Regular Education Special Rate** Type of Agreement (Regular Education (Attach FP-14A) (Check one and indicate the annual amounts of Regular Rate Rate + **Education, Special Rate and Total Annual Tuition** Special Rate) Parent/Guardian Request ___ Tuition Waived Discretionary - Parent/Guardian requests to enroll (Parent/Guardian) ____\$____ student outside District of Residence Tuition Waived Mandatory - Elementary student to attend where high school age sibling(s) attends (Parent/Guardian) ___ Tuition Waived Mandatory - Student lives closer to school of choice \$ and at least 3 miles from resident district school AND **___**\$____ (District of Residence) District of Residence does not provide transportation Mandatory - Geographic barrier prohibits attendance Tuition Waived in District of Residence (District of Residence) State/Court Placement □ \$ (includes foster and group home placements) (State of Montana) Tuition Waived **District to District Placement** ___\$_ (District of Residence) SECTION V: AGREEMENTS AND SIGNATURES A signature below acknowledges receipt of the Student Attendance Agreement. Transportation and tuition will be charged to the Parent/Guardian, District of Residence, or the State of Montana as indicated in Sections III and IV. A. DISTRICT OF CHOICE/PLACEMENT The Board of Trustees: X_APPROVES this Student Attendance Agreement DISAPPROVES this Student Attendance Agreement B. DISTRICT OF RESIDENCE The Board of Trustees: APPROVES this Student Attendance Agreement (only required if transportation and/or tuition is to be paid by the District of Residence) DISAPPROVES this Student Attendance Agreement X ACKNOWLEDGES receipt of this Student Attendance Agreement (only if no transportation and/or tuition is charged by the District of Residence OR parent/guardian or state is responsible for tuition) Board Chair: ____ Date: ___ Signature: C. SUPERINTEDENT OF PUBLIC INSTRUCTION The Superintendent of Public Instruction: ACKNOWLEDGES receipt of this Student Attendance Agreement OPI Representative:



STUDENT ATTENDANCE AGREEMENT (FP-14)

School Year 20__ - 20__

SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN - OR - OFFICIAL OF STATE AGENCY/COURT

request that the following student be allowed to attend	d a school district outside the student's District of Residence
Student Name (last, first, middle initial)	Days Finsley M
Birthdate 9/23/11	
Student Address 516 Marie St	East Glader MT 59434
Parent/Guardian Address	21
Individual Responsible for Placement	
Relationship to Student father	406 564 5249
Agency Responsible for Placement:	
Address (include city, state and zip code):	
	n after acceptance by the district of choice and will specify the costs, if any, idance. If the student attends under this agreement, the parent/guardian guardian under the terms of this agreement.
Signature of Parent/Guardian:	<i>J</i> h Date:
State Agency/Court Request OR Group Home Represe	entative Signature
Signature of Official of State Agency/Court/Group Hom	ne: Date:
ECTION II: TO BE COMPLETED BY DISTRICT OF	CHOICE/PLACEMENT
Student State ID	Student Grade
District of Choice/Placement	District of Residence
ndividual Making Request Parent/Guardian	Student Placement Group Home Placement
Court	Foster Home Placement
☐ State Agency	Annual Pupil Instruction Days
CTION III: TRANSPORTATION – TO BE COMPL	
	arent/guardian will transport at own expense (Go to Section IV)
ransportation Provided by District of Choice/Placeme Bus Service at No Cost Bus Service, charging parent/guardian OR Bus Service, charging State of Montana \$	District of Residence \$ per (attach payment schedule) per year (over-schedule costs only – attach documentation of costs)
ransportation Provided by District of Residence Bus Service at No Cost Bus Service, charging parent/guardian \$	der a TR-4 Individual Transportation Contract (3 miles from school/bus stop) per (attach payment schedule)
	der a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)



ECTION IV. TOTTION COSTS - TO BE CONFEETED BY DE			1 =
Type of Agreement	Regular Education	Special Rate	Total Annual Tuition
(Check one and indicate the annual amounts of Regular	Rate	(Attach FP-14A)	(Regular Education
Education, Special Rate and Total Annual Tuition			Rate + Special Rate)
Parent/Guardian Request			
Discretionary - Parent/Guardian requests to enroll	Tuition Waived		\$
student outside District of Residence	\$		(Parent/Guardian)
Mandatory - Flementary student to attend where high	Tuition Waived		\$
school age sibling(s) attends	□ \$		(Parent/Guardian)
Mandatory – Student lives closer to school of choice	Tuition Waived		
and at least 3 miles from resident district school AND	□ s	□ s	\$
District of Residence does not provide transportation	7		(District of Residence)
Mandatory – Geographic barrier prohibits attendance	Tuition Waived		\$
in District of Residence	□ s	L\$	(District of Residence)
tate/Court Placement			N
includes foster and group home placements)	<u>\$</u>	 \$	\$
	Tuition Waived		(State of Montana)
District to District Placement		\$\$	\$
	\$\$		(District of Residence)
CTION V: AGREEMENTS AND SIGNATURES			
signature below acknowledges receipt of the Student Attendar	A T		ill be abassed to the
			nn be charged to the
arent/Guardian, District of Residence, or the State of Montana	us maicuteu in sections	ili uliu iv.	
. DISTRICT OF CHOICE/PLACEMENT			
The Board of Trustees:			
APPROVES this Student Attendance Agreement			
DISAPPROVES this Student Attendance Agreement			
	1		
Board Chair: /201 av Crahhul			
Board Chair: Buian Crahhug	2	1,	17.16
Signature:		Date:	17-19
B. DISTRICT OF RESIDENCE	7		7
The Board of Trustees:			
APPROVES this Student Attendance Agreement (only	required if transportat	ion and/or tuition is to	o be paid by the Distric
of Residence)			
DISAPPROVES this Student Attendance Agreement			
ACKNOWLEDGES receipt of this Student Attendance		ransportation and/or	tuition is charged by
the District of Residence OR parent/guardian or state is resp	onsible for tuition)		
Doord Chair.			
Board Chair:			
Signature:		Date	
Signature:		Date:	
SUPERINTEDENT OF PUBLIC INSTRUCTION			
The Superintendent of Public Instruction:			
ACKNOWLEDGES receipt of this Student Attendance Agreem	nent		
OPI Representative:			
	-		
Signature:		Date:	



STUDENT ATTENDANCE AGREEMENT (FP-14)

School Year 20__ - 20__

SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN - OR - OFFICIAL OF STATE AGENCY/COURT

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)	Fre
Birthdate 4/7/14	
Student Address 516 Mark 54 Ea	st Glacier MT 59634
Parent/Guardian Address/	1/
Individual Responsible for Placement father	
Relationship to Student Father	406 56 4 5244
Agency Responsible for Placement:	
Address (include city, state and zip code):	
Parent Signature This agreement will be returned to the parent/guardian after accomplication which will be charged to the parent/guardian for attendance. If agrees to pay the costs, if any, charged to the parent/guardian u	ceptance by the district of choice and will specify the costs, if any, the student attends under this agreement, the parent/guardian nder the terms of this agreement.
Signature of Parent/Guardian:	Date:
State Agency/Court Request OR Group Home Representative S	ignature
Signature of Official of State Agency/Court/Group Home:	Date:
ECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE	/PLACEMENT
Student State ID	Student Grade
District of Choice/Placement	District of Residence
Individual Making Request ☐ Parent/Guardian ☐ Court ☐ State Agency	Student Placement Group Home Placement Foster Home Placement District to District Placement
Enrollment Start Date	Annual Pupil Instruction Days
ECTION III: TRANSPORTATION – TO BE COMPLETED BY	
Transportation Provided by District of Choice/Placement ☐ Bus Service at No Cost ☐ Bus Service, charging ☐ parent/guardian OR ☐ District of ☐ Bus Service, charging State of Montana \$ per year (or	Residence \$
Transportation Provided by District of Residence	
☐Bus Service at No Cost ☐Bus Service, charging parent/guardian \$ per	(attach payment schedule)
	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 Discretionary – Parent/Guardian requests to enroll student outside District of Residence	Tuition Waived		\$(Parent/Guardian)
Mandatory – Elementary student to attend where high school age sibling(s) attends	Tuition Waived	7	\$(Parent/Guardian)
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	Tuition Waived	\$	\$(District of Residence)
Mandatory – Geographic barrier prohibits attendance in District of Residence	Tuition Waived	\$	\$(District of Residence)
State/Court Placement (includes foster and group home placements)	<u>\$</u>	\$	\$(State of Montana)
District to District Placement	Tuition Waived	\$	\$(District of Residence)
B. DISTRICT OF RESIDENCE The Board of Trustees: APPROVES this Student Attendance Agreement (only needs)	required if transportat	Date:	he naid by the District
of Residence) DISAPPROVES this Student Attendance Agreement ACKNOWLEDGES receipt of this Student Attendance A the District of Residence OR parent/guardian or state is respo	greement (only if no t		
Board Chair:	91		
Signature:		Date:	
C. SUPERINTEDENT OF PUBLIC INSTRUCTION The Superintendent of Public Instruction:	ent		
ACKNOWLEDGES receipt of this Student Attendance Agreem			