## Browning Public Schools **Board Agenda Request**Meeting To Be Held: 11/24/20

Recogni	tion: Students	Staff	Parents			
Informa	tion:	Old Business	Superintendent's Report			
Action:	Resignation	Hiring	Contract Service Agreements			
	Travel Out-of-State	Travel In State				
	Termination	Legal Matters	Other:			
	This action request pertains to	Elementary (only)	☐ High School/District Wide			
Date:	11/16/20					
To:	<b>Board of Trustees</b> Browning Public Schools		orrina Guardipee-Hall perintendent			
Subject:	Student Attendance Agreen	nent 2020-2021 school yea	ar			
<b>Description:</b> Transportation Department is required to obtain approval of Student Attendance Agreements for board approval.						
Financia	Financial Impact: \$ Transportation Costs and Tuition are waived					
Funding	Source (Budget/grant, etc.):	NA				
Attachment(s): Student Attendance Agreements 2020-2021						
Approval: Superintendent's Office/Finance/Personnel as applicable (Initial)						
Comments:						
Board A	ction: N/A (Info)	Approved Denied	Tabled to:			

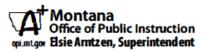


## STUDENT ATTENDANCE AGREEMENT (FP-14)

School Year 20<u>2</u>/- 20<u>-</u>2/

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), Birthdate Student Address Parent/Guardian Address JE ANNIP Individual Responsible for Placement Phone Number Relationship to Student Grand mother 406-470. 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 ALL Student Grade Student State ID District of Residence District of Choice/Placement Student Placement Individual Making Request ☐ Group Home Placement **⊠**Parent/Guardian ☐ Foster Home Placement ☐ Court ☐ District to District Placement ☐State Agency **Enrollment Start Date Annual Pupil Instruction Days** SECTION III: TRANSPORTATION - TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT MNO 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 \$\_ per 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) Transportation Provided by District of Residence ☐ Bus Service at No Cost ☐Bus Service, charging parent/guardian \$\_\_\_ (attach payment schedule) per

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 Regular Education Special Rate Total Annual Tuition

(Charle one and indicate the annual amounts of Decular	Regular Education	(Attach FP-14A)	/Degular Education	
(Check one and indicate the annual amounts of Regular	Rate	(Attach HP-14A)	(Regular Education	
Education, Special Rate and Total Annual Tuition			Rate+	
			Special Rate)	
Parent/Guardian Request	Tuition Waived		s	
Discretionary – Parent/Guardian requests to enroll			(Parent/Guardian)	
student outside District of Residence	<u>L</u> .		,	
Mandatory – Elementary student to attend where high	Tuition Waived		\$	
school age sibling(s) attends	□ s		(Parent/Guardian)	
Mandatory – Student lives closer to school of choice	☐ Tuition Waived		, , , , , , , , , , , , , , , , , , , ,	
and at least 3 miles from resident district school AND	1=	□ s	\$	
District of Residence does not provide transportation	<b></b> \$	<u> </u>	(District of Residence)	
Mandatory – Geographic barrier prohibits attendance	Tuition Waived		<del></del>	
in District of Residence	Tultion waived	\$	\$ \$	
	<u> </u>		(District of Residence)	
State/Court Placement		l	s	
(includes foster and group home placements)	<b></b> \$	<del>                                    </del>	(State of Montana)	
District to District Placement	☐ Tuition Waived			
Don't to Don't National		<b></b> \$	\$	
	<u> </u>		(District of Residence)	
SECTION V: AGREEMENTS AND SIGNATURES				
A signature below acknowledges receipt of the Student Attendar			ill be charged to the	
Parent/Guardian, District of Residence, or the State of Montana	as indicated in Sections	s III and IV.		
A. DISTRICT OF CHOICE/PLACEMENT			- 1	
The Board of Trustees:				
APPROVES this Student Attendance Agreement			1	
			I	
DISAPPROVES this Student Attendance Agreement			1	
D- 1100 111				
Board Chair: Donald Of Connelly				
		01.7	12020	
Signature: Aul A ( smell)		Date: 9/15	12020	
B. DISTRICT OF RESIDENCE				
The Board of Trustees:				
APPROVES this Student Attendance Agreement (only	required if transportat	tion and/or tuition is to	be paid by the District	
of Residence)				
•				
DISAPP ROVES this Student Attendance Agreement				
V ACKNOWLEDGES receipt of this Student Actor down	1		huitian is shareed bu	
X ACKNOWLEDGES receipt of this Student Attendance of the District of Residence OR parent/guardian or state is res	agreement (only it no t	ransportation and/or	tuition is charged by	
The District of Residence on parenty guardian of state is res	vorsible for tultion)			
Board Chala				
Board Chair:			1	
,				
Signature:		Date:		
C. SUPERINTEDENT OF PUBLIC INSTRUCTION				
The Superintendent of Public Instruction:				
•				
ACKNOWLEDGES receipt of this Student Attendance Agreement				
OPI Perrecentative				
OPI Representative:				
Signature:				
Signature:		Date:		



## STUDENT ATTENDANCE AGREEMENT (FP-14) School Year 20<u>20</u> - 20<u>21</u>

SECTION 1: TO BE COMPLETED BY PARENT/GUARDIAN - OR - OFFICIAL OF STATE AGENCY/COURT

SECTION 1. TO BE CONFEETED BY PARENTY COARDIAN				
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)				
Lahr, Caden J.				
Birthdate				
4113105				
Student Address / Dodow Ock \C	Lion MATERIA			
146 Baayer Crr, Va	114,111131786			
Parent/Guardian Address	lier, Mt 59486 wning nut 59417			
Individual Responsible for Placement				
Katu Rittson	406 505 05 75 Phone Number			
Soft NITSOV.	Phone Number			
Relationship to Student	Phone Number			
Mother				
Agency Responsible for Placement:				
Address (include city, state and zip code):	-61117			
	57917			
Parent Signature	eptance by the district of choice and will specify the costs, if any,			
This agreement will be returned to the parent/guardian arter acc	the student ettends under this agreement, the parent/guardian			
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 u	nder the terms of this agreement.			
Signature of Parent/Guardian:	Date: 3-8-20			
Control Agree of Court Descript OD Cream Home of Consecretative S	anatura			
State Agency/Court Request OR Group Home Representative S	gnature			
State Agency/Court Request OR Group Home Representative S Signature of Official of State Agency/Court/Group Home:	gnature  Date:			
Signature of Official of State Agency/Court/Group Home:	Date:			
	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE,  Student State ID	PLACEMENT Student Grade			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE,  Student State ID	PLACEMENT Student Grade			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE,  Student State ID  District of Choice/Placement	PLACEMENT Student Grade			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement \\Q\interline{12}\] Individual Making Request	PLACEMENT Student Grade District of Residence Student Placement			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement	PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement	Date: PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  Foster Home Placement			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement	Date:  PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  District to District Placement			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement	Date: PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  Foster Home Placement			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement	Date: PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  District to District Placement  Annual Pupil Instruction Days			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE,  Student State ID  District of Choice/Placement Individual Making Request Parent/Guardian Court State Agency Enrollment Start Date  SECTION III: TRANSPORTATION – TO BE COMPLETED BY	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian  Transportation Provided by District of Choice/Placement	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE,  Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian  Transportation Provided by District of Choice/Placement  Bus Service at No Cost	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian Provided by District of Choice/Placement  Bus Service at No Cost  Bus Service, charging parent/guardian OR District of	PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  District to District Placement  Annual Pupil Instruction Days  DISTRICT OF CHOICE/PLACEMENT  ardian will transport at own expense (Go to Section IV)  Residence \$			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian 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 (a)	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian 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 (a)	PLACEMENT  Student Grade  District of Residence  Student Placement  Group Home Placement  District to District Placement  Annual Pupil Instruction Days  DISTRICT OF CHOICE/PLACEMENT  ardian will transport at own expense (Go to Section IV)  Residence \$			
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Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian Provided by District of Choice/Placement  Bus Service at No Cost  Bus Service, charging parent/guardian OR per year (  Mileage reimbursement to the parent/guardian under a TR-4  Transportation Provided by District of Residence  Bus Service at No Cost	Date:			
Signature of Official of State Agency/Court/Group Home:  SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/ Student State ID  District of Choice/Placement  Individual Making Request  Parent/Guardian  Court  State Agency  Enrollment Start Date  SECTION III: TRANSPORTATION — TO BE COMPLETED BY  NO TRANSPORTATION will be provided. Parent/guardian Provided by District of Choice/Placement  Bus Service at No Cost  Bus Service, charging parent/guardian OR District of Bus Service, charging parent/guardian under a TR-4  Transportation Provided by District of Residence  Bus Service at No Cost  Bus Service, charging parent/guardian Specific per	Date:			



SECTION IV: TUITION COSTS - TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT 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 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: 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 (only required if transportation and/or tuition is to be paid by the District of Residence) DISAPPROVES this Student Attendance Agreement 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: \_ C. SUPERINTEDENT OF PUBLIC INSTRUCTION The Superintendent of Public Instruction: ACKNOWLEDGES receipt of this Student Attendance Agreement OPI Representative: \_\_\_\_\_\_\_\_\_\_\_ Signature: \_