

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Barry, Mylee E.	Birthdate June 9, 2006
Parent/Guardian Address (physical) 174 William Johnson Rd Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <u>Charlita Barry</u> Date: <u>4-13-2022</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 129050247	Student Grade 10
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	<input checked="" type="checkbox"/> \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Johnson, Davis L.	Birthdate August 18, 2015
Parent/Guardian Address (physical) 172 William Johnson Rd, Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <i>Johnson</i> Date: <i>April 20/22</i>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 284335462	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

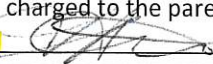
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Aines, McKenzie A.	Birthdate September 1, 2009
Parent/Guardian Address (physical) 1145 Reagan Road, PO Box 2021 Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 	Date: 5-5-22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 867220043	Student Grade 8th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

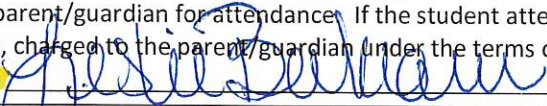
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Berkram, Dallas W.	Birthdate October 31, 2006
Parent/Guardian Address (physical) 1346 Reagan Road, Box 578 Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 	Date: 4/19/22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 102741240	Student Grade 10th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Bird, Preston J.	Birthdate January 15, 2005
Parent/Guardian Address (physical) 23306 Hwy 2 West Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Preston Bird</i></u> Date: <u>5/27/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 871804129	Student Grade 12th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

- _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Blackman, Cayton L.	Birthdate January 24, 2012
Parent/Guardian Address (physical) 23620 US Hwy 2 PO Box 1866 Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Danella Arntzen</i></u> Date: <u><i>5/19/22</i></u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 487710338	Student Grade 5th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input checked="" type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Castillo, Alivia A.	Birthdate June 15, 2014
Parent/Guardian Address (physical) 6020 Emma Rd. PO Box 2125, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Ledie Sharma</i></u> Date: <u>5/25/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 491013947	Student Grade 2nd
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	<input type="checkbox"/> \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 10-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Castillo, Laken C.	Birthdate August 13, 2015
Parent/Guardian Address (physical) 6020 Emma Rd. PO Box 2125, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Lisue Sherma</i></u> Date: <u><i>5/25/22</i></u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 360425337	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

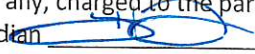
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Dorame, Autumn	Birthdate September 23, 2005
Parent/Guardian Address (physical) 46 Old Person Rd. PO Box 1171, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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  Date: 5/26/2022	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 623044416	Student Grade 12th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

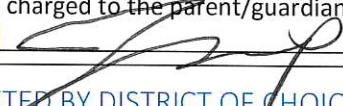
District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 20²² - 20²³

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) Gray, Henry A.	Birthdate November 29, 2010
Parent/Guardian Address (physical) 41 Yellowbirdwoman Rd, PO Box 1766, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 	Date: 5/12/20

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 394102811	Student Grade 6th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 2022 - 2023

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) Harwood, Carlyle W.	Birthdate March 22, 2014
Parent/Guardian Address (physical) 10 Bad Eyes Rd, PO Box 2374, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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	Date: 4/18/22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 689054678	Student Grade 3rd
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Harwood, Cowen	Birthdate April 26, 2017
Parent/Guardian Address (physical) 10 Bad Eyes Rd PO Box 2374, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Shirley Harwood</i></u> Date: <u>4/18/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	Student Grade K
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

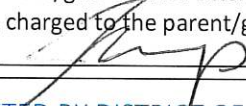
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Heavyrunner, Charles	Birthdate March 9, 2017
Parent/Guardian Address (physical) 41 Yellowbirdwoman Rd, PO Box 1766, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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  Date: <u>6-8-22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	Student Grade K
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

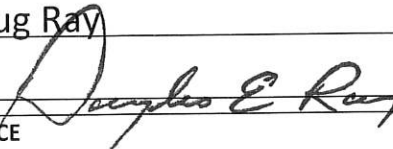
Transportation and tuition will be charged as indicated in Sections III and IV.

A. DISTRICT OF CHOICE/PLACEMENT

The Board of Trustees:

- APPROVES this Student Attendance Agreement
 DISAPPROVES this Student Attendance Agreement

Board Chair Doug Ray

Signature  Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

- APPROVES this Student Attendance Agreement
 DISAPPROVES this Student Attendance Agreement
 ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

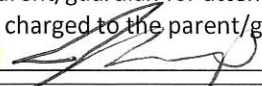
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Heavyrunner, James J.	Birthdate September 4, 2015
Parent/Guardian Address (physical) 41 Yellowbirdwoman Rd, PO Box 1766, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 	Date: 5-12-22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 963579424	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

____ APPROVES this Student Attendance Agreement

____ DISAPPROVES this Student Attendance Agreement

____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

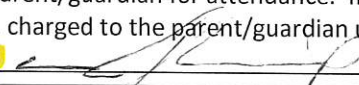
District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 2022 - 2023

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) Heavyrunner, Joseph W.	Birthdate September 4, 2015
Parent/Guardian Address (physical) 41 Yellowbirdwoman Rd, PO Box 1766, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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  Date: <u>5-12-22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 252476501	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

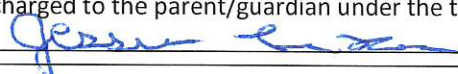
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) LaPlant, Calvin W.	Birthdate March 20, 2010
Parent/Guardian Address (physical) 26 Arrowtop Rd, PO Box 1426, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 	Date: 4/21/22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 775554443	Student Grade 7th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 2022 - 2023

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) LaPlant, Kallie	Birthdate November 25, 2008
Parent/Guardian Address (physical) 23480 Hwy 2 West, PO Box 1866, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <i>[Handwritten Signature]</i> Date: <i>4/18/2022</i>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 724377723	Student Grade 8th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

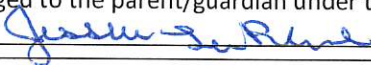
STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) LaPlant, Katie L.	Birthdate September 16, 2011
Parent/Guardian Address (physical) 26 Arrowtop Rd, PO Box 1426, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 	Date: 4/21/22

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 530948605	Student Grade 5th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) LaPlant, Madilyn A.	Birthdate October 23, 2012
Parent/Guardian Address (physical) 137 3C Bar Rd, PO Box 2017, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Misty LaPlant</i></u> Date: <u>10/11/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 147579234	Student Grade 4th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1) PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT School Year 2022 - 2023

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) LaPlant, Miley F.	Birthdate July 14, 2011
Parent/Guardian Address (physical) 137 3C Bar Rd, PO Box 2017, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Miley LaPlant</i></u> Date: <u><i>7/11/22</i></u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 112252001	Student Grade 6th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement
 Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence


STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Meineke, Isaiah A.	Birthdate September 13, 2008
Parent/Guardian Address (physical) 10 Bad Eyes Rd, PO Box 2374, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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  Date: <u>4/18/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 222168461	Student Grade 8th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Reagan, Robert R.	Birthdate June 14, 2005
Parent/Guardian Address (physical) 522 Badger Creek Rd. PO Box 2572, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <i>Rob Reagan</i> Date: <i>5/19/22</i>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 495802696	Student Grade 12th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Running Crane, Damon J.	Birthdate June 1, 2010
Parent/Guardian Address (physical) 416 2nd Ave SW, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <i>Cheryl Lewis</i>	Date: <i>4.22.22</i>

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 327623731	Student Grade 7th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Skunkcap, Chelsey	Birthdate September 5, 2008
Parent/Guardian Address (physical) 26 Arrowtop Rd, PO Box 1426, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u>Jessica LaPlante</u> Date: <u>4/21/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 554462128	Student Grade 9th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement
 Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Vaile, Felix M.	Birthdate September 16, 2012
Parent/Guardian Address (physical) 5129 Flat Iron Rd, PO Box 1807, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <i>[Signature]</i> Date: <i>May 19, 22</i>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 253771148	Student Grade 4th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

_____ APPROVES this Student Attendance Agreement

_____ DISAPPROVES this Student Attendance Agreement

_____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) VanBuren, Wynter R.	Birthdate November 30, 2007
Parent/Guardian Address (physical) 31 Bus Garage Rd, PO Box 2594, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <i>Kerri A. Walter</i> Date: <i>4-20-2022</i>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 909174332	Student Grade 9th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	\$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement
 Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Wilder, Morgan	Birthdate May 7, 2008
Parent/Guardian Address (physical) 31 Harwood Drive, Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Morgan Wilder</i></u> Date: <u>5/19/2022</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 511039792	Student Grade 9th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

_____ APPROVES this Student Attendance Agreement

_____ DISAPPROVES this Student Attendance Agreement

_____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Wilder, Reace J.	Birthdate October 9, 2015
Parent/Guardian Address (physical) 31 Harwood Drive, Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Rj Wilder</i></u> Date: <u>5/19/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 852694587	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

_____ APPROVES this Student Attendance Agreement

_____ DISAPPROVES this Student Attendance Agreement

_____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Wilder, Riley D.	Birthdate October 9, 2015
Parent/Guardian Address (physical) 31 Harwood Drive, Cut Bank, MT 59427	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Ryan Wilder</i></u> Date: <u>5/19/22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 969882569	Student Grade 1st
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
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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			
<input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray
 Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE
 The Board of Trustees:
 _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____
 Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 2022 - 2023

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) Young Running Crane, Jerry H.	Birthdate December 30, 2010
Parent/Guardian Address (physical) 11 Bearskin Rd, PO Box 182, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Ellens K Burdeau</i></u> Date: <u>5-27-22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 674446461	Student Grade 6th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$_____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

- APPROVES this Student Attendance Agreement
 DISAPPROVES this Student Attendance Agreement
 ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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)	Young Running Crane, Sashiah J.	Birthdate	January 6, 2009
Parent/Guardian Address (physical)	11 Bearskin Rd, PO Box 182, Browning, MT 59417		
Student Address (group home only)			
Parent/Guardian 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		Date	
Ellen K Burdeau		5-27-22	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	836854517	Student Grade	8th
District of Choice/Placement	15	District of Residence	9
Individual Making Request	Student Placement		
<input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	<input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement		
Enrollment Start Date	August 24, 2022	Annual Pupil Instruction Days	177

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
<input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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
<input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature Douglas E Ray Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

_____ APPROVES this Student Attendance Agreement

_____ DISAPPROVES this Student Attendance Agreement

_____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence

STUDENT ATTENDANCE AGREEMENT (FP-14.1)

PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20²² - 20²³

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) Young Running Crane, Sheyelynne B.	Birthdate September 25, 2007
Parent/Guardian Address (physical) 11 Bearskin Rd, PO Box 182, Browning, MT 59417	
Student Address (group home only)	
Parent/Guardian 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 <u><i>Ellen K Burdau</i></u> Date: <u>5-27-22</u>	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID 843096625	Student Grade 9th
District of Choice/Placement 15	District of Residence 9
Individual Making Request <input checked="" type="radio"/> Parent/Guardian <input type="radio"/> District	Student Placement <input type="radio"/> Group Home Placement <input type="radio"/> District to District Placement
Enrollment Start Date August 24, 2022	Annual Pupil Instruction Days 177

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 <input checked="" type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ _____ per _____ (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ _____ per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> 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 <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging parent/guardian \$ _____ per _____ (attach payment schedule) <input type="radio"/> 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 (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 <input checked="" type="radio"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	<input checked="" type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____		\$ _____ (Parent/Guardian)
<input type="radio"/> 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	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
<input type="radio"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)
Group Home Placement <input type="radio"/>	_____ \$ _____ (District of Residence)	<input type="checkbox"/> \$ _____ (State of Montana)	\$ _____ (Total)
District to District Placement <input type="radio"/>	<input type="checkbox"/> Tuition Waived <input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$ _____ (District of Residence)

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged 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 Doug Ray

Signature *Douglas E Ray* Date: 6-14-22

B. DISTRICT OF RESIDENCE

The Board of Trustees:

- _____ APPROVES this Student Attendance Agreement
 _____ DISAPPROVES this Student Attendance Agreement
 _____ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair _____

Signature _____ Date _____

District of Residence Determination (check one):

<input type="radio"/>	The residence of the minor's parents
<input type="radio"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="radio"/>	If there is a dispute over which parent determines the child's residence, the address of the parent with primary residential custody as determined by the court is the child's residence