

PARENT APPLICATION FOR OUT OF DISTRICT SCHOOL ATTENDANCE

I am requesting my child(ren) attend USD 376 Sterling for the 2023-24 school year. My child(ren) and I reside in

_____. I understand that the school district I am applying for my family member(s)
USD # or District Name
to attend, is under no obligation to accept or approve this application.

Please provide names, grade, gender and addresses for every child for which you are making application.

1	Child Legal First Name	Child Legal Last Name	Grade	Male	Female
	Street Address	City	Kansas	Zip Code	
2	Child Legal First Name	Child Legal Last Name	Grade	Male	Female
	Street Address	City	Kansas	Zip Code	
3	Child Legal First Name	Child Legal Last Name	Grade	Male	Female
	Street Address	City	Kansas	Zip Code	
4	Child Legal First Name	Child Legal Last Name	Grade	Male	Female
	Street Address	City	Kansas	Zip Code	

PARENT APPLICATION FOR OUT OF DISTRICT TRANSPORTATION

I am requesting out of district transportation for the child(ren) listed above: YES NO

I hereby certify my child(ren) and I are residents of USD # _____ and we reside 2.5 miles or more from the attendance center my child(ren) should attend in our resident school district. I understand that the school district I am applying to for transportation is under no obligation to accept and or approve this application. I also understand if the address(es) listed above change(s), this application will be re-evaluated.

Parent/Legal Guardian Initials: _____

PARENT/LEGAL GUARDIAN INFORMATION

Parent/Legal Guardian (PRINTED)	Cell Phone	Other Phone
Address	City, State ZIP	
Email address	Parent/Legal Guardian Signature & Date	

OFFICIAL SCHOOL DISTRICT USE