Unified School District #410 Durham-Hillsboro-Lehigh

Request for Admission of an Out-of-District Student

Directions: Please complete the following form and submit it to:

Clint Corby, Superintendent

USD 410 812 East A

Hillsboro, KS 67063.

620-947-3184

Questions about completing this form may to directed to the superintendent or the principal of the building in which the student is requesting to be enrolled.

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que	sted Date of Admission:		Building Requested:		
•	Student Information				
	Name:				
	Address:				
	Phone Number:				
3.	School where student is presently or was previously enrolled (if student is not presently enrolled, please provide information about last school attended)				
	School Name:		Phone Number:		
1	Parent Information				
	Father's/Guardian's Name:				
	Father's/Guardian's Name:	'			
	Father's/Guardian's Name: Address:				
	Father's/Guardian's Name: Address: Employer:	Phone # (Work)			
	Father's/Guardian's Name: Address: Employer: Phone # (Home)	Phone # (Work)			
	Father's/Guardian's Name: Address: Employer: Phone # (Home) Mother's/Guardian's Name:	Phone # (Work)			

C.	Add	Reason(s) for requesting attendance in USD 410: Continued attendance in USD 410 from previous year Proximity to Parent Work Friends Attend	
		Extra-Curricular Program Proximity to Home Know Teacher or Staff Educational Program Unhappy at Previous School	
	2.	Does your student currently participate in any of the following programs? Yes No	
		Special Education	
		At-Risk	
	3.	How many days has the student been absent from school in the: a. previous grading period (nine weeks)?	
		b. previous school year?	
	4.	For high school students, what is the applicant student's grade point average?	
	5.	In the previous school year, was the applicant student suspended or expelled from school? Yes No	
	6.	Does the applicant student have adjudicated offender status? Yes No If yes, please provide details.	
	7.	How will the applicant student be transported to school?	
I consen	t to all	ow USD 410 to request my student's records from the school previously attended.	
Parent/0	Guard	ian Signature: Date:	