PUYALLUP SCHOOL DISTRICT 2019-2020 SECONDARY

NON-RESIDENT APPLICATION FOR ENROLLMENT (Primary residence is not within the Puyallup School District boundaries)

Please return application to:
Puyallup School District
Attention: Stacie Estrada
302 2nd St. SE
Puyallup, WA 98372

- Due Date: Submission window is December 10 - January 10 for optimal placement.
- If the request is received after January 10, the next due dates for review are April 10 and June 1. Requests received after June 1 may be denied until after 4th day counts in September.
- Please complete form and return to the district office, not the school.

Check all that apply:
- ☐ NEW Applicant (This is a first -time request.)
- ☐ RENEWAL Applicant (I attended a Puyallup school last year on a waiver.) Student ID #_____
- ☐ PARENT employed by the Puyallup School District Location:_____FTE:_____
- ☐ NEW ADDRESS from last year (Please check box if this is a new address.)

1. **Obtain an approved RELEASE OF ATTENDANCE from the student's resident school district and attach to this form.**
2. **<u>New</u> applications must also attach the following to be considered a COMPLETE application: a) Transcript, b) Immunization Record, c) Previous School Discipline Record (If there are no discipline issues, we need a signed dated statement from your current school that there are no discipline issues.), d) Attendance Record, e) State Assessment Records.**
3. **Applications will be processed on a first-come, first-served basis and will not be considered until application is complete. Decisions for acceptance are made contingent on facility space, school enrollments, staffing, and student programs.**
4. **Should overcrowding exist, non-resident students would be reassigned to a different school where space is available.**
5. **Conditions for Transfer:** ○ **Good Behavior – no discipline problems** ○ **Good Attendance – regular and prompt** ○ **Good academic effort in all subject areas** ○ **Provide own transportation to and from school**
6. **Application must be submitted <u>annually</u>.**

Resident School District:_____ **Resident School:**_____	**School Requested** **1st choice:**_____ **2nd choice:**_____		**Requested start date** ☐**First semester** ☐**Second semester**
Student Name (print)	**Grade to be Enrolled In**		**Date of Birth (mo/day/yr)**
Home Address **City**	**State**	**Zip Code**	**Years enrolled in the PSD**
Mailing Address (if different than home address)			
E-Mail Address			
Parent/Guardian Name	**Work Telephone #**		**Home Telephone #**
Current School	**School Telephone #**		**School Contact (principal, counselor)**

1. **Does your student currently receive Special Education Services?** Yes ☐ ***If yes, please attach a copy of IEP.*** No ☐
2. **Does your student currently have a 504 Plan?** Yes ☐ ***If yes, please attach a copy of 504 Plan.*** No ☐
3. **Are there any health-related issues?** Yes ☐ ***If yes, please explain:*** No ☐
4. **What extra-curricular activities, athletics, etc. does your student participate in?** _____
5. **Sibling currently on a non-resident transfer to a Puyallup School District school?** No ☐ Yes ☐
   Which School:_____ **Sibling's Name:**_____ (FIRST LAST)
6. **Reason for the Request (please check one):**
   - **Financial** ☐
   - **Health Condition** ☐
   - **Educational Safety** ☐
   - **Accessibility** ☐
   - **Special Hardship** ☐

☐ I understand that if this request is approved, transportation is the parent's responsibility, and that my student will be held to high standards of academic progress, behavior, and attendance in order to maintain the waiver.

_____ _____/_____/_____
Parent/Guardian Signature ***Date***

School District Use Only

School District Official Signature	Date	Accepted	School	Denied
_____	_____	_____	_____	_____

Puyallup School District does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups.
Questions and complaints of alleged discrimination may be directed to Human Resources, Amie Brandmire ~ (253) 841-8666; Equity and Achievement, Gerald Denman ~ (253) 840-8966; Title IX Coordinator, Jim Meyerhoff ~ (253) 841-8785; or Section 504 Coordinator, Gerald Denman ~ (253) 840-8966