

Elementary Out of District Attendance Application Form

To be completed by parent or guardian and submitted to the appropriate Superintendent by September 1st of the current school year.

Student Name	Date of Birth		
Full Address	City		
Postal Code	Telephone		
Parent(s)/Guardian(s) name			
Email address			
Home School by Residence	Current Grade		
Requested School			
Is your child currently in a special education classroom (e.g. RISE or GAINS classroom)?		Yes	No
Does your child receive special education supports (e.g. Learning Support)?		Yes	No
Is your child currently supported by support staff (e.g. an EA or DSW)?		Yes	No
Reason for Request			

I understand that transportation will not be provided by the Board and will be the responsibility of the parent/guardian.

Parent/Guardian Signature