

Nonresident Request for School Admission

for School Year _____

Please complete the following information and return this form to the school you wish your child to attend.
Please type or PRINT CLEARLY using dark ink.

Student's Name _____ DOB _____
Soc'l Sec. No. _____ Grade Level Last School Year _____
School Requested _____ Attended Summer School? _____ (Yes or No)

Elementary (Grades K-5): Grade Level Requested _____

Secondary (Grades 6 -12): Courses desired: e.g. Algebra 1, French 2, Government, AP English 1 0

Special services (e.g. special education, speech, or remedial classes) required or received in prior year: _____

Zoned school in Name _____
City of residence Address _____
(Required) _____
Phone _____ Name of Principal _____

Parent/Guardian's Name _____
Parent/Guardian's Address _____
Home Phone _____ Work Phone _____ Zip Code _____
Is this the child's legal residence? _____ If not, explain: _____

Are you employed by the Portsmouth Public Schools? _____

Location _____ **Phone No.** _____

Reason for request _____



This request is void if the statement of the reverse side is not signed.

Nonresident Request for School Admission

If this request is approved, I understand the following:

- My child will be subject to all policies, regulations, and guidelines of Portsmouth Public Schools, including the code of Student Conduct.
- If approved, this transfer is in force for the current school year or remainder thereof. A new request must be submitted and approved each succeeding school year.
- I will be responsible for providing timely transportation for my child to and from school. I will assure my child does not arrive at school unduly early or stay after school unduly late. I understand the school district will not be responsible for providing transportation or crossing guards.
- I am aware this request may not be made for athletic purposes and that a student may not participate in a Virginia High School League-sponsored event until s/he has sat out 365 consecutive calendar days following enrollment in a school.
[Exception: students entering ninth grade within 15 days of school opening are eligible immediately.]
- Unless I am an employee of the Portsmouth Public Schools, I understand I am responsible for basic tuition costs of **\$1,696.00 per year**, or proportionate part thereof, plus all additional costs of any extra services, the costs to be determined by the Portsmouth Public Schools.
- I understand if this request is not approved I may request a review in writing to a Director of Instruction.
- This request can be made void if I have not answered all questions truthfully and fully.

Parent/Guardian's Signature

Date

Official Use Only

Principal's Decision Approved Denied Date Parent Notified _____

Reason for Denial _____

Principal's Signature _____ Date _____



Principal: Please complete the information above and return a copy of this form to the Nonresident Officer at the I RC.

Appeal

Director's Decision: Approved Denied

Director's Signature _____ Date _____

Date Parent Notified _____