

AMHERST COUNTY PUBLIC SCHOOLS
NON-RESIDENT STUDENT APPLICATION FORM

Please complete the following information and submit this form to the Superintendent. Only completed applications will be considered, and the parent/guardian will be notified of the decision as soon as possible. Amherst County Public Schools reserves the right to approve or deny non-resident students. No decision will be made until all attendance, discipline and scholastic records from the previous schools are on file. **Applications for non-resident requests must be submitted annually for approval.** Submit one application per student to the Superintendent during the period of May 1 through July 15, annually prior to the start of the upcoming school year. Any deviation of this time period needs the approval of the Superintendent.

Student's Full Legal Name: _____ Student's Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Student's Upcoming Grade Level: _____ Student's Sex: ____ Student's SS. No. _____

Name and address of parent or guardian:

Name: _____

Street Address: _____

Home Phone Number: _____ Parent(s) Work Number(s): _____

Previous school attended: _____

School requested: _____

No. of school days missed this school year: _____ No. of school days missed last school year: _____

Has the student had disciplinary problems or referrals at the previous school? ____ Yes ____ No

If yes, please explain in the space below and provide the record immediately.

Has the student been expelled from any public or private school? ____ Yes ____ No

Please provide an explanation of why you wish for your child to attend Amherst County Public Schools. *(If additional space is needed, please attach on separate sheet.)

Does the child receive any special educational services? _____Yes _____No

I attest to the best of my ability that all of the information given is accurate. Any misrepresentation may result in the denial of this application. I will also make sure that all academic, attendance, and discipline records are made available to the school my child is applying to attend. I understand that this placement is temporary. The student will be evaluated periodically. To remain in the Amherst County Public Schools, the student must meet the expectations of the division. **A new non-resident application request must be submitted each school year.**

Parent/Guardian Signature: _____ Date: _____

School Use	
Date Received: _____	Previous school attended has been contacted: _____
Student has been attending requested school for _____ years.	
Student/Teacher Ratio: _____	Principal Recommendation: Approval _____ Disapproval _____
Principal/Administrator Signature: _____	Date: _____
If student was enrolled previously, attendance and behavior comments are to be included.	
Comments: _____	

Central Office Use	
Comments: _____	

Approved: _____	Not Approved: _____
Signature: _____	Date: _____
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