



Non-Resident Application

Student's Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Birth Date: _____

PRESENT SCHOOL: _____

PRESENT GRADE: _____

THIS APPLICATION IS FOR WHAT GRADE: _____

What School District does this student currently live in?

Parent/Guardians: _____

Address (if different from student): _____

City: _____ Zip: _____

Phone: _____ Email: _____

I am requesting permission to enroll in Saline Area Schools under the following authorization:

- Child of Saline Area School employee
- Received a release from home district: _____
- Tuition student

Please indicate the services, if any, that are currently being provided for your child:

Special Education Gifted/Talented Remedial Help ESL Other

In accordance with Saline Area School regulations for acceptance of non-resident students, the parent/guardian must certify the following information:

- Has this student ever been expelled from school? No Yes If yes, date: _____
- Has this student been suspended during the past two years? No Yes If yes, date: _____
- Has the student ever been reported as a truant? No Yes If yes, date: _____
- Has the student ever been asked to leave a non-public school? No Yes If yes, date: _____

Does the student currently have suspension or expulsion proceedings or is the student currently under investigation for a serious infraction that may result in suspension or expulsion? No Yes

Explain any yes answers:

Failure to report this information will result in the immediate disenrollment of the student.

My signature below signifies that I understand the above limitations on acceptance and certify that the information provided on this application is true and complete. I further understand that failure to accurately report the requested information is grounds for immediate disenrollment from Saline Area Schools. My signature also authorizes the release of my child's records to Saline Area Schools prior to acceptance in the district.

I understand that I must provide timely transportation for my child/children to and from school.

For Office Use Only

Date Received: _____

Grade: _____

Enrollment APPROVED
Building: _____

Enrollment DENIED
Reason: _____

Authorized Signature: _____

Released by: _____
School District

Parent/Guardian Signature

Date