Office	use only:
Date:	
Time:	

Billings Public Schools Out of District Request to Enter on Tuition Basis School Term 2021 to 2022

(Needs to be completed every year)

*Parent/Guardian complete form and submit to K-12 Executive Director's office.

415 North 30th Street, Billings, MT 59101

Copy with decision will be sent to the parent/guardian.

		Student Info	rmation			
Student Name:						
Fii	rst Name	M.I.	Last Name		Suffix	
Present Grade:	_State ID:					
Birth Date:	Turns	18 on:				
District of Residence School	ıl:	BPS Sch	nool Requested: _			
Student Address:						
	Street	City	State	Zip		
Current School Attending			Desired D	ate of Transfe	r:	
	Pa	rent/Guardian	Information			
Parent/Guardian Name:						
	First Name	M.I.	Last N	lame		Suffix
Parent/Guardian Address:	Street		City	State	Zip	
Discourse.			,		Ζip	
Phone:	Secondary	Pnone:				
Lives with stude	ent					
☐ Guardian						
Parent/Guardian Name:						
	First Name	M.I.	Last N	lame		Suffix
Parent/Guardian Address:						
	Street		City	State	Zip	
Phone:	Secondary	Phone:				
Lives with stude	ent					
☐ Guardian						

Name:		First Name		M.I.		Last Na	me			Suffix
Address:		Stree	t	C	itv		State		Zip	
Phone:					•				p	
uition Amount:	☐ K-6	\$1,213.21	(TUI1)	Prorated Ar	mount:	\$				
021-2022 rate)	_□ 7-8	\$1,539.21	(TUI1)							
	□ □ 9-12	\$1,539.21 (TUI2)							
*Note: Tuition rate		change hase	ed on 20	121-2022 d	tate ra	te				
Troce. Fairion race	c subject to	change base		itional Inforr						
			, , , ,	icional inion						
If yes, please expla Has the student even a student explain the s	in:er been susp	ended or expe	elled fron	n any school	?	☐ Yes		□ No		
If yes, please expla	er been susp	ended or expe	elled fron	n any school	?	☐ Yes		□ No		
Has the student every lifyes, please explain	er been suspoin: equesting to e the parent: (P	ended or expe	elled from	n any school :: (Additional elow to indica	? I inform	☐ Yes	ay be a	□ No		ou have not
Has the student ever If yes, please explain th	er been suspoin: equesting to extend the parent: (Pt or document: Records (e.g.	ended or expe	elled from	n any school :: (Additional elow to indica	? I inform	☐ Yes	ay be a	□ No		ou have not
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Has the student ever If yes, please explain the student ever If yes, please explain the student ever If yes, please explain the student explain th	er been susponin: equesting to extreme parent: (Pat or documents Records (e.g. of the Records) e Records Discipline Records ucation Record	ended or expe	elled fron	n any school : (Additional elow to indicate the school of	? I inform	☐ Yes	ay be a	□ No	d. If y	ou have not

I understand I must provide transportation and that varsity level MHSA eligibility may be affected if my child is allowed to enter on a tuition basis.

Procedures. I have read Policy 3141 and Procedure 3141 and agree to the conditions. Parent/Guardian Signature: Upon K-12 Executive Director's approval of student entering his/her school, the parent/guardian is to take this document to the Business Office, Room 206, Lincoln Center, 415 North 30th Street, Billings, MT 59101 to fill out an official tuition contract regarding entering as a tuition student. The parent/guardian shall be responsible for payment unless otherwise arranged as set forth when signing the tuition agreement in the business office. Failure to pay tuition will result in the parent/quardian being notified that the student will no longer be allowed to attend said school. School administrators will also be notified of nonpayment of tuition and will be requested to un-enroll said student. For District Use Only Approve - School Placement: ☐ Deny K-12 Executive Director Date Comments:

Acceptance as a tuition student will be based on the criteria set forth in Policy No. 3141 of the Billings Schools' Policies and