

**Jefferson County
School District 509J**

Code: **JECB-AR(5)**
Revised/Reviewed: 7/23/18

Application for Nonresident Student Admission – Tuition Students

For Office Use Only
Student ID# _____

School Year _____

Nonresident District _____ Resident District _____

Student Information

Legal Last Name _____ Legal First Name _____ Legal Middle Name _____

Mailing Address _____ Apartment # _____

City _____ State _____ Zip _____

Date of Birth _____ (MM/DD/YY) Student's Current Grade Level _____

Primary Phone of Parent/Guardian _____ Secondary Phone _____

Email Address _____

Parent/Guardian Name (Person in Parental Relationship) _____

Is the student currently under expulsion? Yes No

If yes, what was the reason? _____

If my child is admitted, I hereby authorize the release of the student educational records to _____
(name of district) and certify that I am the parent or guardian in legal custody of the student.

Signature of Parent/Guardian _____ Date _____

For Office Use Only:	
Final Action of Nonresident District: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Reason for denial or comments: _____ _____	
Superintendent/Designee: _____	Date _____