## Rockbridge County Public Schools / <u>Non-Resident Student Application</u> 2022-2023 School Year

Directive: Submit this completed for												
Rockbridge County School Administrators interest of Rockbridge Public County Scho							ng the scho	ool year a	accordin	ig to t	the best	
PLEASE COMPLETE THE FOLLOWING INFO		-		-			ON.					
_					_		_					
Student Name:Last	First		Middle	S	tudent Dat	e of Bir	th:/_	/	Ag	je: _		
SCHOOL AND GRADE FOR WHICH APPLIC				-2023 SCH	OOL YEAR:							
School:												
Grade:												
SCHOOL YOUR CHILD ATTENDED DURING	THE 2021-20	22 SCHOOL	YEAR:									
DID YOUR CHILD ATTEND THIS SCHOOL I	DURING THE 20	21-2022 s	CHOOL YE	AR UNDER T	HE STUDENT 1	RANSFER		FION PRO	CESS?			
Yes No												
Parent/Guardian: Telephor						none Number (home):						
Mailing Address:					Father's Work Number:							
		Mother's					Nork Number:					
Is Parent/Guardian employed by	Rockbridae	County Pu	blic Sch									
Resident of:	2	•										
Alleghany County ( ) Amherst	County ( )	Augusta	County (	) B	Suena Vista (	City()	Lex	ington C	City()			
Other Locality:					_							
Number of school days missed over	the past 12 m	nonths:										
Does your child currently receive ad	-			what types?	?(Title I. Gi	fted Edu	cation. Sr	pecial Ed	lucatio	n. eta	c.)	
• Has your child had disciplinary prob						)						
If yes, please indicate any disciplina	ary problems e	encountered	at the pr	evious scho	ool:							
				· · · · · · · · · · · · · · · · · · ·								
Please provide an explanation of w	hy you would l	ike your chi	ld to atte	nd a Rockb	ridge Count	/ Public S	School ou	itside of	your a	ittenc	lance	
area:												
				<u> </u>								
				<u></u>								
						· · · · · · ·						
I attest to the best of my ability that al this request is granted, I understand th												
understand that if my child fails to ma	intain acceptab	le standards	of condu	ct, attendai	nce, and stud	lent perf	ormance,	approval	l will b	e rev	oked. I	
understand that this request must be parents/guardians will be notified after												
<b>PLEASE NOTE:</b> Students for whom Ro											,	
not be allowed to enroll under the non-								21 2022	50100	i ycui	<u>vviii</u>	
Parent/Guardian Signature:		<u> </u>				Dat	e:					
Upon approval, checks for tuition shoul	d be made pav	able to Rock	bridae Coi	untv Public	Schools. Pav	ment sh	ould be <b>m</b>	nailed to	Rockb	ridae	County	
Public Schools, Attention: Non-Resid												
Rockbridge County Public Schools.)												
SCHOOL ADMINISTRATION USE O	NLY SIGNA	SIGNATURES					TE	APPROVED		Den	Denied	
Requested School Principal												
If denial, reason:												
Assistant Superintendent							_			I	PAID IN	
		N AMOUNT DUE PAYME			T AMOUNT DAT		TE AMOUN		NT DATE		FULL	
	TUITION	WAIVED					1			- 11		