

## Request to Attend an Out-of-Attendance-Area School

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The Simcoe County District School Board has a policy which allows students to attend out-of-attendance-area schools providing there is sufficient space within the established class loading policies and the admittance of out-of-attendance-area students does not result in more staff than otherwise would be allocated. The policy also states that the board will assume no obligation to provide transportation for students who have chosen to attend out-of-attendance-area schools. The responsibility for getting to and from school will rest entirely with students and their parents/guardians. Students who are currently subject to or under expulsion are not eligible to attend an out-of-attendance-area school. The home school principal will forward the form to the receiving school principal who will complete section C and then forward the form to the appropriate superintendent for a decision.

PART A - To be completed by t	he parent/guardia	ın or student aged 1	18 or older			
Date of Request:						
Student Information Legal Last Name:	Legal First Name:		Lega	Legal Middle Name:		
Preferred Last Name:	Preferred First Name:		Prefe	Preferred Middle Name:		
Date of Birth:						
Student's Home Address Street:	Apt/Suite:	City:		vince:	Postal Code:	
Home School:			Gra	de Level (grade at	current home school):	
Is the student currently subject to or u	under an expulsion?	Yes No				
Does the student have a Safety Plan	on file at the home s	chool? Yes	No			
Is there any other information that the	e school needs to ens	sure the safety and sec	urity of your ch	ild? Yes	No	
Total Credits Earned to Date (second					unselling Summary to this application.	
Requested Out-of-Attendance-Area Requested School (school being requ			Gra	de Level (grade at	requested school):	
Requested Start of School Date:			(0.4 - rath ())			
Requested Start of School Date:			(Month/Y	•		
Reason for Request. Please provide	details supporting yo	ur request in the space	below or attac	h as a document	to this application.	
Parent/Guardian Information						
	Nother Father	Joint* Other				
* In the case of Joint Custody, both agreement, the out-of-attendance-			ance-area req	uest. If a custo	dial parent is not in	
Are there legal documents that set ou	it custody and acces	s to the student?	Yes No	)		
Is a Court Order filed in the student's		No	_			
Note: It is the responsibility of the parent/guardithe school about any special custody and/or acceptable.	ian to provide a copy of the cess arrangements, includi	most recent court order/custong restraining orders, interim o	ody agreement for a orders, amending o	the Ontario Student R orders, etc.	Record (OSR) and to inform	
Student Living With (please specify):						



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Parent/Guardian #1 Name:	Relationship to Student:				
Home Phone:	Work Phone	Work Phone:		Cell Phone:	
Address: Same as student / If different	ent from student	:			
	Apt/Suite:	City:	Province:	Postal Code:	
	.pu Canto.	City:		1 0010.	
D 1/2 // 1/2 //					
Parent/Guardian #2 Name:			Relationship to Stu	udent:	
Home Phone:	Work Phone:		Cell Phone:		
Address: Same as student / If different	ant from atudant				
	ent from student Apt/Suite:	 City:	Province:	Postal Code:	
	•	•			
Parent/Guardian/Adult Student Acknow			7 0 1 1 1 1 1 1 1	A	
Personal information collected on this form is collected Municipal Freedom of Information and Protection of P	Privacy Act for the pur	pose of accessing student eligibility to at	tend an out-of-attendance-	area school in accordance with	
Simcoe County District School Board Policy 2310 – regarding personal information collected on this form r			ne current and the following	ng two school years. Questions	
I/we certify that the information that I/we have prov	•		ny/our knowledge.		
Parent 1 / Guardian 1 / Name (ple	ease print)	Signature		Date	
Adult Student					
PART B – To be completed by the h	nome school p	orincipal			
Home School:			Student Currently R		
			Yes	No	
Principal Name:	Princip	al Signature:	Date:		
Principal's Comments/Notes:					
PART C – To be completed by the r	equested sch	ool principal			
Requested School:			1		
Principal Name:	Princip	al Signature:	Date:		
Principal's Recommendations (in consulta	ation with superir	standant of aducation):			
Finicipal's Neconiniendations (in consulta	ulon with superii	iterident of education).			
PART D – To be completed by the s	superintenden	t of education			
	t Denied				
Rationale for Denial of Request:					
Superintendent of Education Name:	Superii	ntendent of Education Signature	: Date:		
•		9			