## FLAGSTAFF UNIFIED SCHOOL DISTRICT NO. 1. BOUNDARY EXCEPTION APPLICATION

According to Arizona State Law, out of boundary exceptions will be approved only if space or program is available at the receiving school. All rules pertaining to the Arizona Interscholastic Association will be strictly enforced and students must understand the rules of eligibility before signing this agreement. It is a strong recommendation that in-district transfers happen at natural grading breaks (quarter, semester). Attendance and discipline files will follow the student to the receiving school and are cumulative throughout the student's high school career.

## The following conditions apply to the Boundary Exception Program:

- 1. If you intend for your student(s) to attend a school outside of your residence attendance area, a Boundary Exception Application should be completed by April 30 for PRIORITY enrollment during the following year. Applications received after this date will be acted on in the order received as capacity allows.
- 2. Enrollment is subject to the capacity limit established for the school and/or its grade levels.
- 3. Parents or Legal Guardians must agree to provide transportation to the receiving school except as provided by law.
- 4. A student's athletic eligibility does not automatically transfer to the receiving school after 9<sup>th</sup> Grade. Students must apply separately for transfer of athletic eligibility.
- 5. Providing false information on this form may result in the application being denied or admission being revoked.

I have read and understand the above conditions and I will support these conditions in order to receive permission to attend the school outside my home attendance area. This signatory affirms that the student will abide by the rules, standards and policies of the school and the District if enrolled. **Please SUBMIT the completed form to the school you wish to attend.** 

ignature of Parent/Legal Guardian			Date				
Student Name:					DOB:		
Lo	ast, Firs	t	M.I.			MM/DD/YY	YY
Parent/Legal Guardian	Name:						
		Last,	First	M.I.			
Home Address:				,		AZ	
	Street			<u>.</u>	City		Zip
Home/Cell #:			Wo	rk #:			
Name of Previous Sch	nool Attended:						GRADE:
If outside FUSD: Add	ress, City, ST, Z	<u></u> ip					
Name of School you	•		.11.				GRADE:
S the above named so Currently subject to In compliance with	o expulsion fro			Ye Ye		N/A	
****** Student Number:	* FOR DIST	RICT USE ON	ILY DO NOT W		OW THIS LINE	*****	
			Rejected 🔲				
Receiving School Prin	cipal Signature	:			Date:		
Date Applicant was no	otified:			By:			
COPY SENT TO: Pres	vious FUSD Sch	ool l	Receiving School	Stu	dent	Student's	File