



3040 Kemp Road, Beavercreek, OH 45431 • www.beavercreek.k12.oh.us • Phone: (937) 426-1522 • Fax: (937) 429-7517

SUPERINTENDENT'S AGREEMENT

Pursuant to ORC 3313.64 and Beavercreek Board of Education Policy 5111 - Non-Resident Students

INSTRUCTIONS: Please print clearly. Parent/Guardian complete form and forward to Pupil Services Office at address above. Approved copies will be returned to the building enrolled and mailed to parent/guardian. All students are approved on a year-by-year basis. Enrollment may be terminated for any student if significant behavior, academic, or attendance problems develop. Tuition charges may be assessed if false information is provided herein. Information provided is subject to periodic review and verification.

Parent/Guardian Name: _____ Phone No: _____

Current Address: _____ Zip: _____

School District Currently Attending/Resident District: _____

Future Beavercreek Address (if applicable): _____ Zip: _____

Please check below the appropriate reason for request.

- Parent/Guardian is building, purchasing or renting a home in the Beavercreek City School District - Children may attend Beavercreek City Schools for a maximum of ninety (90) calendar days tuition free. Parent/Guardian will provide transportation. *Appropriate documentation of building, purchasing or renting is required.* Continue to the near the bottom of this form to complete information.
- Parent/Guardian is moving from the Beavercreek City School District after commencement of classes and requests that their 12th grade (Senior) student remain in district until the end of the school semester or end of the school year. Parent/Guardian will provide transportation.
- Other-explain (cont. on back if necessary) _____

Full Legal Name of Student(s)	Grade Student will be in this School Year	Building to be Enrolled

Parent/Guardian Signature Date

This form must be notarized if you are building, purchasing or renting a home in the Beavercreek City School District. Construction, purchase, or rental of home may be affirmed by contacting:

Name and Phone Number of Realtor or Contractor Date of Anticipated Occupancy

I verify that the above information is accurate, and that I plan to reside in the residence.

Signature of Parent/Guardian Date Notary Public Date

APPROVED
 DENIED – REASON (IF APPLICABLE) _____

Superintendent/Supt Designee Attending District Date Superintendent/Supt Designee Resident District Date