

STUDENTS

Release of Resident Students

The Request for Release to Attend in Non-Resident District application is to be completed by the parent/guardian of the student residing in the Everett School District who wishes to attend school in another district.

Cross Reference: [Board Policy 3140](#)

Release of Resident Students

Adopted: September 1981
Revised: January 28, 1991
Revised: March 20, 1995
Updated: December 2011
Revised: March 2017

**REQUEST FOR RELEASE TO ATTEND
 IN NON-RESIDENT DISTRICT**

FOR THE _____ - _____ SCHOOL YEAR

The Everett School District must first release your child before another school district may consider your request to have your child attend school in a district where you do not reside. Separate forms must be completed for each child. It is understood that the parent/guardian will assume responsibility for transportation to and from school. Requests are approved for no more than one (1) school year. **It is the parent's responsibility to complete a new form each school year. Please complete and return this form to the district Transfers Department.**

PLEASE PRINT

_____ Student's Name	_____ Birth Date	_____ Grade Entering	
_____ Home Address	_____ City/State	_____ Zip Code	
_____ Mailing Address (if different from home address)	_____ City/State	_____ Zip Code	
_____ Parent/Guardian Name	_____ Home Phone	_____ Work Phone	_____ Email

SCHOOL REQUESTING TO ATTEND

CURRENT/LAST SCHOOL

_____ School	_____ Grade	_____ School	_____ Grade
_____ District	_____ Year	_____ District	_____ Year

Resident Neighborhood School in Everett Public Schools Boundaries: _____

REASON FOR REQUEST: _____

New Request	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Continuing Student	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Sibling at Site (Please indicate grade/s)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
District Employee	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Student Receives Special Education Services/IEP	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Student Receives 504 Services	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Has the Student been Suspended/Expelled from Previous School?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Has the Student had a Truancy Petition Filed (BECCA) from Previous School?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Date

Parent/Guardian Signature

★★★ FOR OFFICE USE ONLY ★★★

RESIDENT AGREEMENT TO WAIVE ATTENDANCE

REQUEST APPROVED EVERETT PUBLIC SCHOOLS hereby agrees to waive attendance for the _____ School year, beginning _____ and ending _____
Everett Public Schools does not assume financial responsibility for student's transportation or other educational costs.

REQUEST DENIED Reason: _____

Date: _____ Signature of District Designee: _____

NON-RESIDENT AGREEMENT TO ACCEPT STUDENT

APPROVED The _____ School District hereby agrees to accept the student beginning _____ and ending _____

DENIED Reason: _____

Date: _____ Signature of District Designee: _____