

**ORANGE COUNTY PUBLIC SCHOOLS
Annual Application for Non-Resident Students**

Name of requested school Requested school year

Student's full name Age Birthdate Entrance grade level

Student's social security number Student's current legal residence (city/county)*

Name of parent/guardian Telephone number

Address City Zip code

Your reason for this request: _____

I understand that if my child fails to fulfill his/her obligations to all policies, regulations and/or guidelines of Orange County Public Schools, or if my child is no longer able to participate in the program or school to which he/she has been admitted, the principal may terminate acceptance of this application. In such a case, I assume responsibility to return my child to his/her home school district. I also understand that I must assume responsibility for transportation of my child to school.

Signature of parent/guardian Date

To be completed by school principal or designee.

Student's current school (prior to transfer): _____

Summary of report from previous school: _____

Signature of individual who compiled report: _____

Recommendation: _____ Approved _____ Disapproved

Signature of principal/designee: _____ Date: _____

*Any person who knowingly makes a false statement concerning the residency of a child, as determined by § 22.1-3, in a particular school division or school attendance zone, for the purpose of (i) avoiding the tuition charges authorized by § 22.1-5 or (ii) enrollment in a school outside the attendance zone in which the student resides, shall be guilty of a Class 4 misdemeanor. (§22.1-264.1) This application shall be submitted annually.