



# Arrowhead School District No. 75

Nonresident Enrollment for the 2024-2025 school year.

Open Enrollment, House Bill 203, takes effect in July of 2024.

Please Note: Nonresident enrollment is not guaranteed.

## **Application Process:**

All nonresident students, PreK-8, must submit an application to be considered for an enrollment agreement with Arrowhead School District No. 75 for the succeeding school year by **June 15**.

Steps to submit an application are as follows:

1. Complete a Nonresident Enrollment Application.
2. Complete an FP-14.1 Form (March 2024) from the Office of Public Instruction. Parents/Guardians should complete Section 1 of the form only.
3. Provide attendance and behavior records for the last three years. These must be official records from the current or previous school(s). Current Arrowhead students requesting attendance and behavior records must complete an Arrowhead School District Student Transcript/Records Request.

NOTE: The completed FP-14.1 Form (March 2024) as well as behavior and attendance records must be submitted to the Arrowhead School District Administrative Assistant.

- Incomplete applications will not be considered.
- Upon receipt of a complete application, the District has 10 days to notify the parent or guardian of the student and district of residence involved in the nonresident enrollment agreement of the anticipated date board will take action on the agreement.

Additional Information:

- Each application will be assigned a random and confidential non-identifying number to keep the student's name private.
- The Principal and Superintendent will submit a list of applications to the Board of Trustees with recommendations **on or before the 2<sup>nd</sup> week of August**.
- Families who have complete applications will be notified two business days prior to the Board Meeting via email notifying them of the recommendation for approval/disapproval of their child's application. Families of applicants who are recommended for waitlist or disapproval may choose to discuss their child's application in a closed executive session of the board.
- Nonresident students enrolled in the Arrowhead School District must complete an application for an enrollment agreement each school year for the succeeding year.
- Acceptance is not guaranteed and decisions will be made in accordance with Policy #3141, #3141P Section 20-5-320, MCA, and the District Strategic Plan.
- The family of a nonresident child whose application for enrollment has been approved is responsible for transportation of the child and the child is not an eligible transportee as defined in Section 20-10-101, MCA.

**ARROWHEAD ELEMENTARY DISTRICT #75**Po Box 37  
Pray, MT 59065

406.333.4359 Phone

406.333.4975 Fax

**Nonresident Enrollment  
Application**

This application is for families who reside outside of the Arrowhead School District who would like to **REQUEST** to enroll their student(s) in the Arrowhead School District for the 2024-2025 school year.

- \* PLEASE COMPLETE ONE FORM PER STUDENT
- \* Only legal guardians can enroll students in school
- \* Only legal guardians can make a request for 2024-2025 Nonresident Enrollment
- \* This application does not guarantee admission to the Arrowhead School District. The purpose is to request consideration based on space available.

**STUDENT INFORMATION (please print or type)**

Last Name	First Name	Date of Birth	
Physical Address:	City	State	Zip
Current Grade Level	Current School District		

Reason for Requesting Nonresident Attendance:

**PARENT/LEGAL GUARDIAN INFORMATION (please print or type)**

First & Last Name	Phone Number	Email	
First & Last Name	Phone Number	Email	
Physical Address:	City	State	Zip Code

**REQUEST FOR 2024-25 NONRESIDENT ENROLLMENT**

- This application does not guarantee admission to the Arrowhead School District. The purpose is to request consideration based on space available.
- In addition to this request/application, parents must also submit official copies of attendance and behavioral records for the last three years from current and/or previous schools (contact previous school for records) and FP-14 Form from the Office of Public Instruction. Parents/Guardians should only complete Section 1 on the FP-14 Form.
- Incomplete applications will not be considered.
- Documentation received after the deadline date will not be considered.
- Submission of additional required documents (attendance, behavior, FP-14 Form) can be mailed, emailed or hand delivered. Arrowhead School District Attn: Administration Assistant – PO Box 37, Pray, MT 59065, [mcahoon@arrowheadk8.org](mailto:mcahoon@arrowheadk8.org)

**SIGNATURE**

I acknowledge that I have read and understand the above information.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Office Use Only**

Date Received	
Application Number	
Date Reviewed by Board of Trustees	
Approved/Denied	
Date Notified	

## STUDENT ATTENDANCE AGREEMENT (FP-14.1)

### PARENT PLACEMENT OR DISTRICT TO DISTRICT AGREEMENT

School Year 20\_\_ - 20\_\_

#### SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN

I request that the following student be allowed to attend a school district outside the student's district of residence:

Student Name (last, first, middle initial)	Birthdate
Parent/Guardian Address (physical)	
Student Address (group home only)	
<b>Parent/Guardian Signature (or Group Home Manager, in Place of Parent/Guardian)</b> This agreement will be returned to the parent/guardian after acceptance by the district of choice and will specify the costs, if any, which will be charged to the parent/guardian for attendance. If the student attends under this agreement, the parent/guardian agrees to pay the costs, if any, charged to the parent/guardian under the terms of this agreement. Signature of Parent/Guardian _____ Date: _____	

#### SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID	Student Grade
District of Choice/Placement	District of Residence
Individual Making Request Parent/Guardian District	Student Placement Group Home Placement District to District Placement
Enrollment Start Date	Annual Pupil Instruction Days

#### SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

NO TRANSPORTATION will be provided. Parent/guardian will transport at own expense (Go to Section IV)

<b>Transportation Provided by District of Choice/Placement</b> Bus Service at No Cost Bus Service, charging ___ parent/guardian <b>OR</b> ___ District of Residence \$_____ per _____ (attach payment schedule) Bus Service, charging State of Montana \$_____ per year (over-schedule costs only – attach documentation of costs) Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)
<b>Transportation Provided by District of Residence</b> Bus Service at No Cost Bus Service, charging parent/guardian \$_____ per _____ (attach payment schedule) Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)

**SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT**

Type of Agreement (Check one and indicate the annual amounts of Regular Education, Special Rate and Total Annual Tuition)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
<b>Parent/Guardian Request</b> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	___ Tuition Waived ___ \$ _____		\$ _____ (Parent/Guardian)
Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	___ Tuition Waived ___ \$ _____		\$ _____ (Parent/Guardian)
Mandatory – Student lives closer to school of choice and at least 3 miles from resident district school AND District of Residence does not provide transportation	___ Tuition Waived ___ \$ _____	___ \$ _____	\$ _____ (District of Residence)
Mandatory – Geographic barrier prohibits attendance in District of Residence	___ Tuition Waived ___ \$ _____	___ \$ _____	\$ _____ (District of Residence)
<b>Group Home Placement</b>	___ \$ _____ (District of Residence)	___ \$ _____ (State of Montana)	\$ _____ (Total)
<b>District to District Placement</b>	___ Tuition Waived ___ \$ _____	___ \$ _____	\$ _____ (District of Residence)

**SECTION V: AGREEMENTS AND SIGNATURES**

*Transportation and tuition will be charged as indicated in Sections III and IV.*

**A. DISTRICT OF CHOICE/PLACEMENT**

The Board of Trustees:

\_\_\_ APPROVES this Student Attendance Agreement

\_\_\_ DISAPPROVES this Student Attendance Agreement

Board Chair \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**B. DISTRICT OF RESIDENCE**

The Board of Trustees:

\_\_\_ APPROVES this Student Attendance Agreement

\_\_\_ DISAPPROVES this Student Attendance Agreement

\_\_\_ ACKNOWLEDGES receipt of this Student Attendance Agreement

Board Chair \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**District of Residence Determination (check one):**

<input type="checkbox"/>	The residence of the minor's parents
<input type="checkbox"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
<input type="checkbox"/>	In the case of controversy, the district court has jurisdiction over residence