Richmond County Public Schools
2018 - 2019 Non-Resident Application

Received:

Student Name:			**Date of Birth:**	
Physical Address:				
Mailing Address:				
Parent(s) or Guardian(s):				
Phone:	**Home ( )**	**Cell ( )**	**Work ( )**	
Email Address:				
County of Residence:				
Last School Attended:			**2018 – 2019 Grade:**	

Reason for applying to Richmond County Public Schools:

Has your child experienced any attendance, academic or discipline problems in his/her current school? YES ( ) NO ( )

If "YES", please explain:

Are there any criminal or civil charges pending against your child? YES ( ) NO ( )

Will your child need Special Education services under IDEA II or Section 504 of the Rehabilitation Act? YES ( ) NO ( )

If "YES", please attach all eligibility documents and most current IEP to this application.

Please initial this section indicating you understand that either you or the school division (if services are not available in your home school division) of your residence must bear the actual cost of any special education services your child may receive. _____

Is a parent/guardian an employee of Richmond County Public Schools? YES ( ) NO ( )
School Name: _____

Is a parent/guardian an employee of Richmond County? YES ( ) NO ( )
Department: _____

I have read Richmond County Public Schools Non-Resident Student Policy JECC found on www.richmond-county.k12.va.us or contacted Richmond County School Board Office at 804-333-3681 to request a copy. I understand and agree to the terms for initial and continued admission. I certify by my signature that all information in this application is correct. I further acknowledge that Richmond County Public Schools reserve the right to assign my child to any appropriate school where space is available.

Signature: _____ Date: _____

Printed Name: _____

FOR HIGH SCHOOL STUDENTS ONLY:
VHSL RULES APPLY TO HIGH SCHOOL STUDENTS WISHING TO TRANSFER

Section 28-6-1 Transfer rule of the Virginia High School League states that a student will be ineligible to participate in VHSL sponsored activities for 365 consecutive calendar days if enrolled in one high school and subsequently transfers to another high school without a corresponding change in residence of his/her parents/guardians.

HIGH SCHOOL PARENT/GUARDIAN PLEASE SIGN TO VERIFY YOU UNDERSTAND THIS RULE.

Signature: _____ Date: _____

Return application to:
Richmond County School Board Office
PO Box 1507
92 Walnut Street
Warsaw, VA 22572
Fax 804-333-5586

The following documents must be submitted with application for consideration:

1. **Attendance Record**
2. **Discipline Record**
3. **Transcript**

RECOMMENDATION:

Administration Signature:
_____

Date: _____