

D.C. EVEREST AREA SCHOOL DISTRICT
6300 Alderson Street, Weston, WI 54476
NONRESIDENT OTHER THAN OPEN ENROLLMENT STUDENT
APPLICATION FOR ENTRANCE – AGREEMENT

Name of Student: _____

Current Address: _____

Street

City

State

Zip Code

Age _____ Birth _____ Current Grade _____ Last Grade Successfully Completed _____

Address at beginning of school year if different from current address:

Street

City

State

Zip Code

Parent/Guardian: _____

First

Middle

Last

Current Address: _____

Street

City

State

Zip Code

Last School Attended: _____

Street

City

State

Zip Code

Reason For Application: _____

If student is admitted, I agree to pay tuition, if applicable.

Signature of Parent/Guardian

Date

Superintendent's Recommendation: Yes _____ No _____ Board's Decision: Yes _____ No _____

Superintendent

Date

Board Clerk

Date

If Application Refused, Explain: _____

Tuition Charged: _____ Payment Due _____ Date Paid: _____

Assistant Superintendent, Business/Personnel Services

Date

Exhibit Approved: 8/10/82
Exhibit Revised: 9/03/09
KAG:ems

SCHOOL BOARD
D.C. Everest Area School District
6300 Alderson Street
Weston, Wisconsin 54476