

# Application Form for Nonresident Enrollment GST BOCES School District

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## Notification of Home School district

Date: \_\_\_\_\_ Signed (school official): \_\_\_\_\_

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Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Last name first name

Address: \_\_\_\_\_  
Number street city state zip code

Father/legal guardian's name: \_\_\_\_\_ Home telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Number street city state zip code

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

Mother/legal guardian's name: \_\_\_\_\_ Home telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Number street city state zip code

Employer: \_\_\_\_\_

Work address: \_\_\_\_\_ Work telephone: \_\_\_\_\_

### Present school enrollment:

Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

Name of nonresident school district to which you are applying: \_\_\_\_\_

Reason for leaving present school: \_\_\_\_\_

I certify that this information is true.

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\_\_\_\_\_  
Father's/legal guardian's signature

\_\_\_\_\_  
Mother's/legal guardian's signature

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Transportation to and from school for nonresident students is the responsibility of the parent. No transportation for nonresident students will be provided.

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### Approval/disapproval for enrollment:

Recommended

Not recommended

Approved

Not approved

Signed: \_\_\_\_\_  
Building principal

Signed: \_\_\_\_\_  
Superintendent of school district

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

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