

Nonresident Student Attendance Request Form

I _____ request that _____
(Parent/Guardian Name) (Student Name)

be allowed to attend school at the Burlington _____ School for the
20____/20____ school year. Date of the request _____

_____ Admission Approved

_____ Admission Denied

Principal's Signature

Date

If admission is denied - reason for denial _____

*Send one copy to the District Office

ADOPTION DATE: January 15, 1997
REVISION DATE: September 16, 1998