



Laurens County Board of Education Out of District Acceptance Form

2018-2019

Dr. Daniel Brigman, Superintendent

Dr. Jameson Travick, Associate Superintendent

Ms. Holly Deal, Associate Superintendent

Dr. Ronda Hightower, Associate Superintendent



I, _____, parent/guardian of the student (s) listed below would like to request permission to attend a Laurens County School.

Student Name:	School Requested	Age:	Grade:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

STUDENT CURRENT SCHOOL INFORMATION:

School Name: _____

Address: _____

Telephone #: _____

If permission is granted, I understand a tuition fee of \$300.00 must be paid in full at the Laurens County Board of Education Centralized Registration office at 338 West Laurens School Road, Dublin, GA (Old West Laurens High School) in order for my child (children) to attend. The annual tuition will include all children in my legal custody.

Factors in determining out of district enrollment can be, but are not limited to the following:

- Number of current In-District students enrolled in applicant's grade level
- Applicant's current or pending discipline status at student's current school
- Applicant's current status with the Department of Family & Children Services (DFACS)

I understand I live outside of the Laurens County School district and should any problem (s) arise pertaining to, but not limited to, discipline and/or attendance with my child, the principal may request the parent/guardian return to the actual district of residence.

Parent/Guardian's Signature: _____ Date: _____

ADMINISTRATIVE USE ONLY:

_____ Approved _____ Denied

Laurens County School Principal: _____ Date: _____

_____ Approved _____ Denied

Laurens County Schools Superintendent: _____ Date: _____