## ADMISSION OF NON-RESIDENT STUDENTS

The Dover Area School District will admit non-resident students from other school districts subject to the following conditions:

1. Application for admission of the student to the Dover Area School District shall be made by the parent or guardian on the attached application form. The completed application (with supporting materials) shall be delivered to the Superintendent no later than the first day of the month preceding the date of requested admittance of the student.

2. All applications shall be presented to the Board who shall either approve or deny the application for admission. The admission or rejection of any applicant shall be solely at the discretion of the Board. The Superintendent or designee shall immediately notify the student applicant and his/her parents or guardian of the decision of the Board.

Approval of admission of a non-resident student in any case, shall be subject to and dependent upon the building principal's judgment of the availability of sufficient room in the class to which the student would be assigned after enrollment of resident students has been determined.

3. The parent or guardian and the student shall request the last school s/he attended to send a transcript of the student's record, including the disciplinary record, if any, to Dover Area School District at the time of the application for admission.

4. Tuition for non-resident students shall be fixed for each school year calculated by a formula approved by the Pennsylvania Department of Education.

5. Tuition shall be paid annually, semi-annually, or quarterly per agreement with the district. If the student withdraws, is suspended, or is expelled from attending classes in the Dover Area Schools, tuition shall be due and payable for the full month in which such withdrawal, suspension, or expulsion occurs. If tuition for that month has been paid, no refund of tuition shall be made.

6. Non-resident students admitted to the Dover Area School District shall assume the same academic rights and responsibilities afforded to resident students.

7. Non-resident students admitted to the Dover Area School District shall be responsible for their own transportation to and from the school of attendance.

8. The Board may attach such other conditions or such other variances to admissions of non-resident students as it, in its discretion, may deem necessary or advisable.

## Information Sheet

The tuition charges for non-resident students are based on the actual costs of instruction, as calculated according to a formula approved by the Pennsylvania Department of Education. Until the figure for the present school year is determined, the Dover Area School District will charge tuition fees at the approved tuition rate for the previous year. When the new rate is approved, tuition bills will be adjusted to reflect the increase or decrease in instructional costs.

### Directions for Completing the Application For Admission Forms

1. Part A is to be completed by the student and his/her parents.

2. The parents of the student(s) shall request that Part B be completed by personnel in the school last attended by the student(s).

3. Both portions of the application form should be forwarded to the following (as appropriate for the age/grade of the student):

Dover Area High School
4500 Intermediate Ave
Dover, PA. 17315
ATTN: Building Principal
717-292-8066/ Fax#717-292-2125
<u>rshoemaker@doversd.org</u>

Leib Elementary 2925 Oakland Road Dover, PA 17315 ATTN: Building Principal 717-292-8070/Fax#717-292-4828 nvance@doversd.org Dover Middle School 46 West Canal Road Dover, PA 17315 ATTN: Building Principal 717-292-8067/ Fax#717-292-4721 jerowand@doversd.org

North Salem Elementary 5161 North Salem Church Rd. Dover, PA 17315 ATTN: Building Principal 717-292-8071/Fax#717-292-4388 cberkheimer@doversd.org Dover Elementary 109 East Canal Street Dover, PA 17315 ATTN: Building Principal 717-292-8068/Fax#717-292-4645 kholtzapple@doversd.org

Weigelstown Elementary 3205 Carlisle Road Dover, PA.17315 ATTN: Building Principal 717-292-8072/Fax#717-292-4581 crupp@doversd.org

4. No action on a request for admission of a student can be taken until both portions of the application (Part A and B) have been received.

5. If there are questions regarding the status of a request for admission, please call the Dover Area School District Administration Office, 717-292-3671.

#### APPLICATION FOR ADMISSION OF NON-RESIDENT STUDENTS

# A. TO BE COMPLETED BY STUDENT AND PARENTS Date of Application: Student's Name:\_\_\_\_\_ Last First Middle Address: Telephone Number:\_\_\_\_\_ Requested date of admittance to Dover Area School District: Birth date:\_\_\_\_\_\_ Age:\_\_\_\_\_ Sex: Male Female Name of Last School Attended: School Address: Highest Grade Completed: Name(s) of Parent(s) or Guardian(s): Lives with: Mother Father Other:\_\_\_\_ (Please Specify) Parent or Guardian Employed by: Type of Work: \_\_\_\_\_

Are there any special needs, educational or physical, that school personnel should be aware of in determining the most appropriate educational program for your child?

Reason(s) for Requesting Admission to the Dover Area School District:

We hereby certify that the information set forth in this application for admission is true and complete to the best of our knowledge. We understand that the fees, charged at the approved tuition rate, are due and payable in advance. OUR SIGNATURES GIVE APPROVAL FOR COPIES OF THE STUDENT'S SCHOOL RECORDS TO BE FORWARDED TO THE SUPERINTENDENT OF THE DOVER AREA SCHOOL DISTRICT.

Signature of Student	Date
Signature of Parent/Guardian	Date
Signature of Authorized Building Personnel (*Personnel of school student currently attends)	Date
Signature of Superintendent (Superintendent of Dover Area School District)	Date

# B. TO BE COMPLETED BY ADMINISTRATION OF PRESENT SCHOOL DISTRICT

Student's Name:		
School District:		
School Last Attended:		
Highest Grade Completed:		
1. Number of days absent during the last sch	ool year:	
2. Have you had any disciplinary difficulties If so, explain:		
3. Attitude toward education:		
4. School grades from last year: (Where appli Science course.)	icable, please indicate the specific Soc	ial Studies, Math o
English/Language Arts		
Math		
Science		
Social Studies		
World Language		
Health	Other:	
Physical Education		
Art		
Music		
5. Standardized Test Information:		
IQ Date	Test Name	
Other:		
Enrollment effective date:		
Completed by:		
Print name	Title	Date