

Board of Education
Pamela E. Thomas, Chairman • Brock Ridge, Vice Chairman
Joel Churchwell • Jonathan Merritt • Earl Taylor • Paul Wiggins • Bob Williams

Superintendent Rick Stout

TO: Parent/Legal Guardian/Custodian*

FROM: Dr. Barry D. Collins, Assistant Superintendent/Human Resources

REFERENCE: Onslow County Board of Education Policy 4130 – Discretionary Admission

Individuals requesting an out-of-county placement must return the following four documents:

- Original Out-of-County Student Application (attached) to attend Onslow County Schools
- Release Letter from the school superintendent of the county/local education agency (LEA) in which the Parent/Legal Guardian presently resides
- **Student Conduct Report Form** (attached) filled out by the <u>School Administrator</u> (NOT PARENT) where student last attended
- Transcript or Latest Report Card from the school last attended

Submit the **original application** to the Student Services Department at:

Onslow County Schools Student Services 200 Broadhurst Road Jacksonville, NC 28540

All other documents may be faxed to the Student Services Department at 910-455-0459.

The completed application will be presented to the Onslow County Board of Education for review and action. You will be notified of the Board's decision by letter. **Tuition for the 2017-2018 school year is \$1,985.00 for each child.** Upon written notification of approval, and prior to the student's enrollment, tuition is to be paid in full at the central office where you will be issued a receipt of payment. Tuition is to be paid by cash, certified check, or money order, made payable to **ONSLOW COUNTY SCHOOLS.**

Completed applications for out-of-county placement **must be submitted no later than June 1, 2017** to allow sufficient time for the Board to respond to the request prior to the first day of school.

Parent's or legal guardian's who own real property and paid real property taxes to Onslow County for tax year 2016 may be eligible for a credit toward tuition. Please contact Student Services at (910) 455-2211 ext. 20419 regarding the credit.

Per North Carolina High School Athletic Association, a student transferring from one member school in one Local Education Agency (LEA) to another member school in a different LEA must sit out 365 days for athletic participation. Exceptions for immediate athletic eligibility for transfers from one LEA to a different LEA will be heard by a special NCHSAA transfer committee. NCHSAA waiver forms are available on our website under Athletic Eligibility.

Legal guardian/custodian. - The person or agency that has been awarded legal custody of the student by a court.



ONSLOW COUNTY SCHOOLS Request for Reassignment - Out-of-County Application

School Year Requested 201	L 7-201 8	[] Initial Request	[] Rene	wal
You must submit an application for	or each child (please list	all siblings attending Onslow	County Schools on nex	t page):
Student Name			Date of Birth	Grade Level 2017/18
(Last)	(First)	(MI)		
Request to Attend Onslow Count	y Schools			
County (LEA) of Residence				
School Requesting to Attend				
Attending/Last School Attended				
Tuition situations only: Did you ov	wn real property and pay	real property taxes to Onslo	w County in 2016?	
If yes, you must attach a paid tax rece			•	
Request to be Released from Ons			-	
County (LEA) Requesting to be rele	eased to			
School requesting to attend				
Attending/Last School Attended				
Access and a second of Access and a	******	********	**	
Name of Parent/Legal Guardian _			Relationship to Child	
Parent/Legal Guardian Address				
City			State	Zip
Mailing Address (If Different From	Above)			
Home Phone	Cell Phone		Work Phone	
Onslow County School Employee [
	*******	********	**	
On a separate sheet of paper stat	e your educational reas	on for transfer. List all sibling	gs.	
As the parent or court appointed transportation to and from school Board of Education, in writing, with daily punctuality, good attendance	. An out of county transf hin five days of receipt o	fer is a privilege. If this reque If denial. I further understand	st is denied, I may appea	I* the decision to the
*A parent may appeal a decision of	only if student is enrolled	in an Onslow County School.		
Middle and High School Students	Only:			
Does this student participate in at	hletics? [] Yes [] No - If yes, name of sport	·	
Per NCHSAA (North Carolina High school during the same sport seas custodian; change of schools must	on, except in the event o	of a bona fide change in resid		
A student transferring from one i must sit out 365 days for athletic LEA will be heard by a special NCH	participation. Exception	s for immediate athletic eligik	bility for transfers from a	one LEA to a different
Signature of Parent			Date	
		For Office Use*********		
Released by Home Unit	[] Yes [] N		•	[] Yes [] No
Will pay tuition fee Eligible for tuition credit	[] Yes [] N [] Yes [] N	···	ort Caru Attacheu	[] Yes [] No \$



ONSLOW COUNTY SCHOOLS Reason for Request for Reassignment - Out-of-County Application

Student Name		Date o	f Birth	Grade Level 2017/18
(Last)	(First)	(MI)		
Please list all siblings atte	nding Onslow County Scho	ools (you must submit one ap	plication	per child):
Last Name	First Name	2017-18 Grade Level	Schoo Atten	I Requesting to d
State your reasons for this reason for request (if appl		ch required supporting docui	nentation	based upon
Signature of Parent				Dat



TO: Principal or School Administrator FROM: Dr. Barry D. Collins, Assistant Superintendent/Human Resources SUBJECT: Student Conduct Report for Out-of-County Student Admission Request Please have the principal or school administrator complete the following report: Full Name of Student Name of School Grade Does the student have an Individual Education Plan (I.E.P.)? Yes No Was student in good standing academically during the 2016-2017 school year? Yes No Was student's conduct acceptable during the 2016-2017 school year? _____ Yes ____ No Has student met all attendance requirements according to OCS policy 4400? _____ Yes _____ No If no, please explain _______ If the conduct was not acceptable: Is student eligible to return to your school? _____ Yes _____ No Was student sent to In-School Suspension during 2016-2017? _____ Yes _____ No If yes, for how many days? For what reason(s)? Was student suspended out-of-school during 2016-2017? _____ Yes _____ No If yes, for how many days? For what reason(s)? ******* Position of School Administrator Signature of School Administrator School Phone Number Date