



**OUT-OF-DISTRICT APPLICATION  
CHAPMAN USD #473**

Please fill out the following information and return to:  
USD #473 Education Center  
PO Box 249, Chapman, KS 67431  
phone 785-922-6521 -- fax 785-922-6446

Bld. Prin. \_\_\_\_\_  
New to 473 \_\_\_\_\_  
Sibling at 473 \_\_\_\_\_

Date of Application \_\_\_\_\_, 20\_\_\_\_  
Application for the 20\_\_\_\_ - 20\_\_\_\_ school year

Student's Legal Name \_\_\_\_\_  
Sex (circle): Male Female      Last                      First                      Current Gr. Level                      Current School

Student's Legal Name \_\_\_\_\_  
Sex (circle): Male Female      Last                      First                      Current Gr. Level                      Current School

Student's Legal Name \_\_\_\_\_  
Sex (circle): Male Female      Last                      First                      Current Gr. Level                      Current School

Please list all other schools attended this past year for each student: \_\_\_\_\_  
\_\_\_\_\_

Has the student(s) been suspended or expelled? No \_\_\_\_\_ Yes \_\_\_\_\_

Parent's or Lawful Custodian's Name \_\_\_\_\_

Address or Legal Residence \_\_\_\_\_  
Street \_\_\_\_\_  
City                                      State                                      Zip Code \_\_\_\_\_  
Home Phone                                      Business Phone \_\_\_\_\_

Please provide reasons your child(ren) wish to attend USD 473: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

USD 473 will assign Out-of- District students to an elementary attendance center based on the extent that staff, faculty, equipment and supplies are available. BOE Policy JBC.

The undersigned parent or lawful custodian acknowledges that the statements and information above are true and correct; that this request, if approved, will be valid only for the school year indicated above; and agrees to abide by the provisions of the Board Policy. We do hereby acknowledge that we reside outside the district boundaries and it is understood that it is our responsibility to meet a USD 473 bus on an established bus route to the Attendance Center or provide our own transportation.

\_\_\_\_\_  
Signature of Parent or Lawful Custodian

\_\_\_\_\_  
Date