# NON-RESIDENT APPLICATION

Солтаст	A Non-Resident Student is a minor seeking enrollment without their parent or legal guardian. It is the Policy of Provo City School District to admit non-resident students where individual circumstances warrant. see Utah Code Section 53A-2-205.
INFORMATION Liz M Robles	It shall be the intent of the district where the non-resident student is from <u>out of state</u> , to charge tuition established by Utah State Office of Education. Tuition or the Public
STUDENT SERVICES	Education full per capita cost for 1 school year is <b>\$10,000.00</b> for 2024-2025. This tuition must be paid before enrollment and does not include any school fees.
280 W 940 N PROVO UT 84604	All documents must be received in our office for a committee review to apply as a non- resident or to seek a legal guardian through the Utah courts. Expect 10 days for the committee to review the documents. Students MAY NOT enroll until they receive approval from Student Services in the Provo City School District.
Office: 801.374.4838	Non-resident status does not apply if you are 18 years or older Required Items
Phone:	Required items
801-370-4640 Text: 385-309-1064 FAX 801.374.4985 Email: <u>lizm@provo.edu</u> www.provo.edu	<ul> <li>*Notarized letter from parent Explain why the student is not with parent. Any misrepresentation will be cause for denial and/or expulsion.</li> <li>*Local law enforcement information from where the child has lived the past 2 years. Only for students that are 11 years or older, (form included)</li> <li>*School information. (form included)</li></ul>
	*Depending on the case, we may request additional documentation Court appointment documents and/or tuition payment.

A local responsible adult may request to become the legal guardian of the minor through the Utah Courts. If Guardianship is granted, the minor may enroll without paying out of state tuition.

This does not apply for students seeking enrollment through an exchange program or a student visa. For questions regarding International Admissions please use the Foreign Student (Non-Immigrant) I-20 Application Form found at Provo.edu/Student-Services

# STEP-BY STEP Process to request Legal Guardianship

Things to note...

Step Ia. Parent sign and submit the release of local law enforcement forms for students age I2 and older, where the minor has resided for the past 2 years. This is a request for a Background Check	E-mail copy of this form is available. Agencies may fax their response if they submit it on their letterhead. Background check is not needed for 11 year olds and younger.	
Step 1b. Parent sign and submit the authorization for release of school information forms where the student has attended for the past 2 years. This is a request for School Information	E-mail copy of this form is available. Agencies may fax their response if they submit it on their letterhead.	
Step 2. Local Responsible Adult - starts guardianship process with the courts or visit the web site for the Utah courts <u>http://www.utcourts.gov/ocap/</u>	Enter the required information. Print packet (20-30 pages containing various documents and affidavits)	
Step 3. Submit court documents to the 4th District Court at 125 North 100 West Provo, UT 84601	A court fee of approximately \$400.00 for the process	
<ul> <li>Step 4. Provide our office the following items: <ol> <li>Notarized letter from parent</li> <li>Application for Admission</li> <li>Durable Power of Attorney</li> <li>Affidavit of Waiver by School District from court packet</li> <li>Proof of filing for guardianship with the Utah courts</li> </ol> </li> <li>ALSO, provide the Open Enrollment Form if the student is choosing to attend out of area</li> </ul>	The AFFIDAVIT is in the guardianship packet from court. We will be able to fill out this affidavit after receiving 1. the notarized letter from parents, 2. the release of local law enforcement and 3. the authorization for release of school information from each agency. You may use the receipt from the court fees as proof	
The committee will review your request. Once approved you will receive a letter that will provide you with information as to how to enroll in school. If you're required to pay Out of State Tuition, you'll receive an Invoice. Upon payment, an approval letter will be issued.	This may take up to 2 -10 days. Our office must receive the background check (if applicable), School Reports, and Items 1-6 in Step 5 in order to process your request.	
Step 5. If required, pay the Out of State Tuition.	Cash, money order or cc-Visa and MC only On-line at <u>www.myschoolfees.com</u> or visit our office.	
<ul> <li>Step 6. Upon receipt of the acceptance letter you may submit the following to the school.</li> <li>-Approval Letter from Provo School District</li> <li>-Birth Certificate</li> <li>-Immunization Records</li> <li>-Proof of Address for the Local Responsible Adult</li> </ul>	Other items to consider: -TB test if entering the US within the last 6 months. Call the Utah County Health Department at: 801-851-7029 for information -Transcript (for High School aged students only) -School Fees	

# Non-Resident Student Application for Admission

	Today's Date:		
STUDENTS INFOR	MATION		
Last Name		First	Middle
Gender M F	Date of Birth	Age	_Last Grade Completed
Last School Attend	ded(Name, City, State)		
Has this student of Has this student l If the student is of Would you consid Is this arrangeme What services has <b>LOCAL RESPONSIO</b>	BLE ADULT WITH WHOM N	elled from any school? e Juvenile Court system? on track for graduation? e student or a visa studer or economic hardship? ously, such as resource, sp WINOR WILL RESIDE W	Yes No peech, IEP, self-contained, 504? ITH IN PROVO
			. Zip
Phone No PARENT(S)/LEGAI	e- L GUARDIAN'S INFORMAT	mail ION	
Name(s):		Relationship to t	the Student:
Address		City, St,	Zip
Phone No Reasons why the s	eeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeeee	mail / for requesting to atte	nd Provo City:

## **Durable Power of Attorney** (Under U.C.A. § 53A-2-201) THIS POWER OF ATTORNEY DOES NOT CONFER LEGAL GUARDIANSHIP

\_\_\_\_\_ undersigned Grantor(s) is the custodial

parent(s) or legal guardian(s) of (student's name) \_\_\_\_

a minor child. Pursuant to Subsection 53A-2-201 (3), Utah Code 1995, Grantor(s) hereby designates: (local responsible adult)

#### living at (address)\_

as the Custodian(s) of the Student, and grants to said Custodian(s) a Durable Power of Attorney with full authority to take any appropriate action in the interest of the Student, **including authorization for education or medical services**. Such action shall have the same force and effect, and shall bind the undersigned Grantor(s), their heirs and assigns, to the same degree as would have been the case had the action been taken by the Grantor(s). Both the party granting and the party empowered by the power of attorney agree to assume full responsibility for payment of any fees or other charges relating to the student's education in Provo City School District. If eligibility for fee waivers is claimed under § 53A-12-103, both parties agree to provide all financial information requested by the school district in determining eligibility for fee waivers. The Durable Power of Attorney shall not be affected by the disability of the principal and shall remain in effect until the earliest of the following:

The Student reaches the age of 18, marries, or is emancipated;

The following date: \_

This Durable Power of Attorney is revoked or rendered inoperative by the Grantor(s), Custodian(s), or court of law.

GRANTOR(S) (custodial parents):

SIGNATURE (parent)

SIGNATURE (parent)

On this	day of		20,	, personally appeared before me	
personally	known to me	or proved to me	on the bas	asis of satisfactory evidence to be the person whose name is signed, and acknowledged	d
to me that	(s)he signed	it voluntarily for i	ts stated pu	purpose.	

NOTARY PUBLIC

CUSTODIAN(S) (local responsible adults)

undersigned, accepts the designation as Custodian(s) of \_\_\_\_\_

whose relationship to the Student is \_\_\_\_\_\_, and agrees to take all action necessary for the health and welfare of the student, including authorization for educational or medical services and full cooperation with the public school district where the student may be enrolled. The undersigned also agrees to assume responsibility for any fees and other charges relating to the Student's education in the district for the purpose determining eligibility for fee waivers.

SIGNATURE

SIGNATURE

On this \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_, personally appeared before me personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is signed, and acknowledged to me that (s)he signed it voluntarily for its stated purpose.

NOTARY PUBLIC

# RELEASE OF LOCAL LAW ENFORCEMENT/JUVENILE COURT INFORMATION

UTAH CODE: 75-5-206. Local police check for students age 12 or older,

to be completed by local law enforcement where child has resided for the **bast two years**:

## TO BE DONE BY THE PARENT(S)

As parent of \_\_\_\_\_\_ DOB \_\_\_\_\_,

I/we authorize the local law enforcement/juvenile agency of the state of \_\_\_\_\_\_, in which the student has resided for the past two years, to release information to Provo School District Student Services Department. It is understood that these records will be used as part of the application process for school admission. These records are for the use of Provo School District professional staff only and will not be transferred to any other person except as permitted by law.

Parent's Signature	Date	Parent's Signature	Date		
TO BE DONE BY THE AGENCY					
[					
Minor's Name		Date of E	Birth		
		ed against him(her), AND/OR HAS n within the past two years.	NOT been		
	charges filed agains the past two years.	t him(her), AND/OR HAS been the	subject of a criminal		
Comments:					
OFFICER (	print name)	Signat	ture		
Police Department or	Juvenile Court:				
	Com	bleted form MUST BE SENT to:			

Completed form MUST BE SENT to: Provo School District Attn: Student Services 280 West 940 North Provo UT 84604 Phone: (801) 374-4838 Fax: (801) 374-4985

# AUTHORIZATION FOR RELEASE OF SCHOOL INFORMATION

# TO BE FILLED BY PARENTS

As parent of (name of student), I authorize the sch DOB, I authorize the sch District, Student Services Department. I authorize t placement, and confidential special education record be used as part of the application process for entry is the use of Provo City School District professional st as permitted by law.	the release of incident reports, Is <mark>(please attach copies)</mark> . It is ι into Provo City School Distric	, school records for class and grade understood that these records will t schools. These records are for
Parent(s) Signature	Date	·····
School		
Address		
Phone ( )	Fax ( )	
Information to be completed by a desi	gnated school official (counselor,	principal, assistant principal)
Has the student been suspended or expelled fror	n school in the past 2 years?	
lf yes, please explain		Yes, how long for?
Does the student have truancy issues? If yes, please explain		□ No
Has the student had any Safe School violations in t If yes, please explain	• •	D No
Is the student on track for graduation? If not, please explain	2S	D No
5. Does the student have a Special Education Classifi Please list any special services the student has receiv		Contained, etc.
Completed form	MUST BE SENT DIRECTLY to	): 

Completed form MUST BE SENT DIRECTLY to: Provo City School District Attn: Student Services 280 West 940 North Provo UT 84604 Phone: (801) 374-4838 Fax: (801) 374-4985