East Allen County Schools
Tuition Transfer Information Sheet for New Applicants
School Year 2015-2016

May submit application beginning May 1, 2015 with deadline of May 30, 2015.

Tuition to East Allen County Schools is offered only to families that live in Allen County or a surrounding Indiana County.

Dear Parent(s) and Student(s):
Please read all the following information before applying:

**Parent Information**
East Allen students will be given first priority for transfers.
Acceptance of tuition transfers is dependent upon classroom, teacher, class and program availability. All applications along with payments will be presented to the East Allen County School Board for approval in June. The Superintendent’s office will notify parents by letter of the decision in July. Students may not enroll until receiving approval by the School Board. It is the responsibility of the parent to provide transportation to and from school.

**Application Submission and Deadline for New Transfers**
New applicants must submit the application along with the Good Faith Deposit payment of $100 to Student Services beginning May 1: deadline of May 30. Please send application with check or money order to: East Allen County Schools
Student Services
1000 Prospect Avenue
New Haven, Indiana 46774

East Allen County Schools has the right to void the transfer if all information on the application is not filled out accurately. Checks returned to the business office for insufficient funds may result in student(s) being excluded from East Allen County Schools.

**Important – Payment Procedure**

A $100.00, per child, Good Faith Deposit must accompany the request form. The Good Faith deposit will be credited to the student for as long as the student is enrolled at EACS on transfer tuition status. The deposit rolls forward year to year while the child is actively enrolled. In the final year of enrollment with EACS as a transfer tuition student, the $100 deposit is credited against the final transfer tuition billing. The final year could be due to withdrawal of the student, graduation, or moving into EACS district. The Final Transfer Tuition Billing is calculated after the school year is ended and actual costs can be calculated. The parent is billed the total of actual costs for that final year, less the $100 good faith deposit credit. If no monies are owing for the final year, the $100 is refunded to the parents.

Estimated cost for the 2015-2016 school year for a Regular Education student is $500 with a middle school or Special Education student being higher. Actual Transfer Tuition Billing costs are calculated each year based on guidelines provided by the state. Billings are generated after the school year ends June 30 and after actual costs and state credits for the year can be determined. Typically it will be September when you get a billing for the prior school year. If the transfer tuition billing for any school year would result in an amount due from the parents, EACS will bill the parents the full amount due for that school year. The $100 Good Faith deposit does not get credited against an active enrollment billing. It is only refunded or credited back to the parent in the last and final billing year for the student.

Please keep this cover page for your information.
EAST ALLEN COUNTY SCHOOLS
TUITION TRANSFER REQUEST FOR NEW APPLICANTS
2015-16 School Year

May submit application beginning May 1, 2015 with a deadline of May 30, 2015.

Acceptance of tuition transfers is dependent upon classroom availability, teacher availability and class availability. Acceptance of cash tuition does not guarantee a student will be assigned to the first school requested.

PLEASE PRINT:

Student Name _____________________________________________ (last) (first) (middle initial)

Current School: ____________________________

Birth Date ____________________________ Grade in 2014-15: ____________

(month/day/year)

Gender (check one): ___ Male ___ Female

1st Tuition Choice is: ________________________________________ (Name of School)

Ethnic Origin: (check one):

___ Black/African American ___ American Indian/Eskimo

___ Asian ___ Hispanic/Latino

___ Caucasian (white) ___ Two or more races

___ Native Hawaiian/Pacific Islander

2nd Tuition Choice is: ________________________________________ (Name of School)

Special Programs: (check if applicable) My child currently receives:

___ Special Education Services Disability: ____________________________

___ Other (please identify) ________________________________________

Parents/Guardians:

Parents/Guardians __________________________________________

(last) (first) (initial)

Home Address __________________________________________________

(entire address, including St, Rd, Dr, etc.)

________________________________ (city, state) ____________ (zip)

Telephone _____________________________ / _____________________________

(day phone number) (evening phone number)

School attended immediately prior to request for tuition transfer:

Is student in good standing at the school? ☐ Yes ☐ No

______________________________________________________________

(name of school)

(enumerate, including St, Rd, Dr, etc.)

________________________________________ (city, state) ____________ (zip)

Principal _____________________________ School Telephone _____________________________

Sibling Name: ________________________________________ School attending: ______________________

Student Lives With: (circle one) Both Parents Father/Guardian Mother/Guardian Other: _____________

EACS Transfer Tuition
NEW APPLICANT

PLEASE PRINT

Student Name ____________________________________________
(last name) ______________________________
(first name)

In the last 12 months has the student been suspended, expelled or denied attendance at a previous school (separated from school)? ______________________________

Reason and number of days suspended, expelled or separated from school?
____________________________________________________________________________________
____________________________________________________________________________________

Dear East Allen School Board:

We have read and understand the information provided on the tuition transfer request sheet and are requesting permission to pay tuition for our child to attend:

Grade ____ for the 2015-2016 school year at:
____________________________________________________
(Name of 1st choice of school)

____________________________________________________
(Name of 2nd choice of school)

Attached is the Good Faith Deposit of $100.00 due with application.

____________________________________________________________________________________
(Parent/Parents Signature) ____________________________ (Date)

Address: ____________________________________________
(entire address, including St. Rd. Dr etc) ________________
(City) (State) (Zip)

____________________________________________________________________________________
(Student Signature) ____________________________ (Date)

(phone number where you can be reached)

PLEASE RETURN THESE FORMS AND PAYMENT TO: EAST ALLEN COUNTY SCHOOLS
STUDENT SERVICES
1000 PROSPECT AVENUE
NEW HAVEN, IN 46774

1. Transportation to and from the EACS school is the responsibility of the parent.
2. East Allen County Schools has the right to void the transfer if all information on the application is not filled out accurately.
3. Tuition Transfer must be renewed annually by May 1.

NEW APPLICANTS MAY SUBMIT BEGINNING MAY 1, 2015
DEADLINE: MAY 30, 2015