

**ADDISON CENTRAL SCHOOL DISTRICT  
TUITION STUDENT APPLICATION – MIDDLE AND HIGH SCHOOL  
2021-2022 SCHOOL YEAR**

Please print all responses

Today's Date: \_\_\_\_\_ Applying to \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Grade Level (Fall 2021): \_\_\_\_\_

Address: Street \_\_\_\_\_

Town-State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing \_\_\_\_\_

(if different from above)

Legal Town of Residence: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Employed at: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Employed at: \_\_\_\_\_

Student lives with: \_\_\_\_\_ Relationship: \_\_\_\_\_

Guardian/Step-Parent: \_\_\_\_\_ Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Employed at: \_\_\_\_\_

**Current School Information:**

School Name: \_\_\_\_\_

Address: Street \_\_\_\_\_

Town-State \_\_\_\_\_ Zip \_\_\_\_\_

Name of Student's Guidance Counselor: \_\_\_\_\_

SEE REVERSE

# ADDISON CENTRAL SCHOOL DISTRICT

School: \_\_\_\_\_

## Tuition Payment Contract and Schedule

For the 2021-2022 school year, the tuition is **\$18,457** per any non-resident student for the regular instructional program for privately placed students. Expenditures required by a student's 504 plan or IEP as identified in Special Education Rules and other Pertinent Rules §2366.2.1, §2366.2.2, and §2366.2.4 (Vermont DOE, June 2010) will be assessed in addition to the established tuition rate.

For acceptance, a student must be in good standing at the school most recently attended. Good standing shall be demonstrated when the applicant shows:

- that he/she has not been legally dismissed or suspended for more than ten days during the preceding twelve months for disciplinary reasons, and
- that he/she is making satisfactory progress toward the completion of an approved school or home study program, and
- that his/her attendance record presents a reasonable likelihood that any existing attendance requirements of this school district will be met.

All payments shall be made payable to the "Addison Central School District" and shall be delivered to the Addison Central School District business office on the following dates:

<b>Installment</b>	<b>Due Date</b>
\$4,615	August 15, 2021
\$4,615	November 15, 2021
\$4,615	January 15, 2022
\$4,612	March 15, 2022

Failure to meet the required tuition payments shall result in an automatic withdrawal from school.

Student Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Address Street: \_\_\_\_\_

Town: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(if different from above)

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

My signature represents my commitment to this tuition contract.

ACSD Superintendent: \_\_\_\_\_ Date \_\_\_\_\_

Signature represents the school district's commitment to provide these services.