Mission Public Schools

Cross Boundary Application

NOTE: *Cross boundary applications need to be submitted to your catchment school by March 31st for processing for the following year. Cross boundary applications will be valid for a period of one year only.*

Section A - To be completed by Parent / Guardian			
Date:	Enrolling in Grade:	School Year:	
Student's Legal Name:			
Gender:	Date of Birth:		
Parent / Guardian Name:			
Address:			
City:	Postal Code:		
Home #:	Cell #:	Other:	
Requesting to attend:			
Currently enrolled at:			
Catchment school:			
Please use this section to provide a reason for your request. Use back if necessary.			
Please note it is the parent's / guardian's responsibility to provide transportation to a student who is attending a school other than their catchment school.			
Parent / guardian signature:		Date:	

Section B - To be completed by Cross Boundary School Principal			
Application Approved:	Yes:	No:	Principal Signature:
Additional Notes:			

Section C - Cross Boundary Re- Approval for office use only		
Date	Principal Signature	Approved
		Yes / No
		Yes / No
		Yes / No
		Yes / No
		Yes / No

Form updated: January 22, 2018 by AZ