

Baltimore City Schools
200 East North Avenue
Baltimore, Maryland 21202

Agency Placement-Qualifies for
Out-Of-County Tuition Recapture Yes No

Signature of PPW

Date

APPLICATION FOR REQUEST TO ENROLL NONRESIDENT STUDENT
(Adapted for Agency Placement)

*1. Name of Child _____ * Last School _____

*2. Date of birth _____ * Social Security Number _____ * Current Grade Placement _____

*3. Name of Biological Mother _____
Address _____

*4. Name of Biological Father _____ City/County _____ State _____ Zip _____
Address _____

*5. Parental Rights Terminated? Yes No City/County _____ State _____ Zip _____

*6. Status of Parent (Married, Divorced, Separated or Deceased) _____

7. Custodial Parent/Guardian (Not Foster Parents) Mother Father Other _____

Name	Address	City /County	State	Zip
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8. If custody has not been awarded, with whom does the child live when not in a foster care home or residential facility?
 Mother Father Other _____

9. Is this child in a Special Education Program? Yes No Intensity Level _____

10. Agency with Order of Care CFSA (if Known)
* Address of Agency 400 6th St., SW Washington DC 20024
* City/County * State * Zip

* Name of Social Worker _____ * Name of Supervisor _____

* Telephone _____ * Fax _____ * Telephone _____

11. Contractual Service Provider _____
Address _____ City/County _____ State _____ Zip _____
Name of Case Worker _____

Residential Yes No Telephone _____ Fax _____

Foster family/Group Home (Circle One) Guardian/Surrogates ARD Purposes (Circle One)

Name _____

Name _____

Address _____

Address _____

Telephone _____
Home Work

Telephone _____
Home Work

BCPS Home School _____

* Signature of Social /DSS Worker _____ Person Directly Responsible to the County _____ * Date _____

● (ATTACH COPY OF COURT ORDER AND BIRTH CERTIFICATE TO THIS APPLICATION)