

BRISTOL WARREN REGIONAL SCHOOL DISTRICT

151 State Street, Bristol, Rhode Island 02809-2205 TEL: 401-253-4000 • FAX: 401-253-1740

OUT-OF-ZONE PLACEMENT AGREEMENT

As a condition of your child being granted an out-of-zone placement, please sign below and return this form to the building principal as soon as possible.

I have requested and have been granted out-of-zone placement for my child,

for the _____ school year. I agree to provide transportation and understand that if new enrollments result in the size of my child's class exceeding the contractual limit, my child may be reassigned to his/her School in his/her attendance zone for the following school year.

Parent/Guardian Signature

Date

out-of-zone
10/99