



**Stewartstown**  
COMMUNITY SCHOOL

Stewartstown School District

Non-Resident Student Enrollment for Children of Staff Members

JFAB-C Policy Application Form

Staff Member Name: \_\_\_\_\_

Position: \_\_\_\_\_

Child/Childrens

Name(s): \_\_\_\_\_

Grade(s): \_\_\_\_\_

Current Enrollment: \_\_\_\_\_

Reason for Reason Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School Year Request: \_\_\_\_\_

Staff Member/Parent/Guardian Signature: \_\_\_\_\_

School Board Chair Signature: \_\_\_\_\_