

If the student is enrolle <b>completed.</b>	d in any other p	ublic or pri	vate scho	ol this f	orm <b>must be</b>	
Student Name:					Grade:	
School Name:					private	
				C:L		
School Address:						
Zip Code:	Phone:			Fax:		
Does the student receiv Education Services)? If			peech or S	Special	Yes  No	
School		Subject			Credit Hours (High School Only)	
					FTE:	
Principal or Decignos Cignatures				Date:		
					FTE:	
			_		Date:	
MSBSD Principal or Designee	: Signature:					
		FTE Pct	Description	2.55	efined	
		1.00	Full	- 25	+ classes	
		0.75	Three Quarte	200	classes	
		0.50 0.25	Half Quarter	- 100	classes	
		0.23	Quarter	1.0	ciass	