



Instructions for Completing Student Attendance Agreements and Tuition Reports

For detailed information regarding out-of-district attendance, including attendance causes, timelines, and policies, please see the School Finance [Tuition and Attendance Webpage](#).

Contents

- Overview 1
- Completing an FP-14.1 Attendance Agreement 2
- Completing an FP-14.2 Attendance Agreement 5
- Completing an FP14A Tuition Calculation 6
- Completing an FP15 Tuition Report 8
- Sending Documents to the OPI 8
- Questions? 9

Overview

Initiation of Agreements

- Parent Initiated
 - Parent/Guardian requests a student attend a school outside their resident district. There must be an agreement between the District of Attendance and the District of Residence
- District Initiated
 - District of Residence enters into an agreement with the District of Attendance to serve a student outside the resident district. The agreement may be initiated either by the District of Attendance or the District of Residence (if the purpose of the agreement is for educational program offerings not available through the resident district). Student may or may not be identified as Special Education.

Forms

- FP-14.1 Parent or District Student Attendance Agreement
 - To be used in instances of mandatory or discretionary attendance in which the students’ representative is their parent, guardian, or group home manager
- FP-14.2 Foster and Group Home Student Attendance Agreement
 - To be used in instances of mandatory or discretionary attendance in which the students’ representative is a state agency or court
- Fp-14A Special Tuition Rates
 - To be used in calculating tuition rate for special education students or high-cost students without disabilities, in conjunction with the FP-14.1 or FP14.2
- FP15 Tuition Reports

- To be used by districts submitting claims for tuition paid to out of state schools or day treatment facilities

A parent or guardian is responsible for transportation of the student unless otherwise agreed upon by the districts. For completed attendance agreements, the district of residence is responsible to pay tuition to the district of attendance.

After the agreement is complete, a copy must be sent to the county superintendent. If the District of Residence is in a different county than the District of Attendance, the resident district should forward a copy to their county superintendent. The District of Attendance will always forward a copy to their county superintendent. Copies of attendance agreements must be sent via secure format – paper mail or secure file transfer. After agreements are completed by the districts, a copy must be sent to the OPI.

Attendance agreements may not be fully finalized until after the current year budget has been submitted. In sections where the final calculation is not known, the districts may input “TBD”. After the attendance and final calculations are completed, the final numbers can be attached to the existing attendance agreement. The attendance agreement does not need to be redone.

Completing an FP-14.1 Attendance Agreement

If a students’ representative is their parent, guardian, or group home manager, complete each section accordingly:

SECTION I: TO BE COMPLETED BY PARENT/GUARDIAN

I request that the following student be allowed to attend a school district outside the student’s district of residence:

Student Name (last, first, middle initial)	Full legal name of the student	Birthdate	Birthdate of the student
Parent/Guardian Address (physical)	The physical address of the parent/guardian (used to determine resident district)		
Student Address (group home only)	The address of the group home, when a student has been placed by the parent in a group home in the District of Choice		
Parent/Guardian Signature (or Group Home Manager, in Place of Parent/Guardian) This agreement will be returned to the parent/guardian if accepted by the district of choice. The agreement will specify the costs, if any, such as transportation and other fees for which the parent/guardian may be charged. If the student attends under this agreement, the parent/guardian agrees to pay the applicable costs under the terms of this agreement. Signature of Parent/Guardian <u>Signature of Parent or Group Home Manager</u> Date: _____ Contact Phone Number <u>Phone number of signee</u>			

SECTION II: TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Student State ID	The state ID assigned to the student in AIM (the state student information system)	Student Grade	The grade the student is assigned for the enrollment period
District of Attendance	The district in which the student is enrolling, which is not their district of residence	District of Residence	The district the student would attend based on residency
Individual Making Request	<input type="checkbox"/> Parent/Guardian <input type="checkbox"/> District	Student Placement	<input type="checkbox"/> Group Home Placement <input type="checkbox"/> District to District Placement
Enrollment Start Date	The date instruction will begin in the District of Attendance	Annual Pupil Instruction Days	The total number of instructional days in the regular school year at the District of Attendance

SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Transportation may be determined per, 20-5-320(2)(b), MCA:

- Transportation is provided by the parent/guardian;
- Transportation can be provided by agreement of the district of residence and the district of attendance; or
- Transportation is discretionarily provided by the district of attendance.

Select one of the following:

Indicate which scenario is occurring

Transportation Provided by Parent/Guardian	
<input type="checkbox"/>	No transportation will be provided by the district of residence or the district of attendance. Parent/guardian will provide transportation
Transportation is Discretionarily Provided by the District of Attendance	
<input type="checkbox"/>	Bus Service at No Cost
<input type="checkbox"/>	Bus Service, charging parent/guardian \$ <u>Amount</u> per <u>distance</u> (attach payment schedule)
<input type="checkbox"/>	Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)
Transportation Provided by Agreement of the District of Residence and the District of Choice	
<input type="checkbox"/>	Bus Service at No Cost
<input type="checkbox"/>	Bus Service, charging <input type="checkbox"/> parent/guardian OR <input type="checkbox"/> District of Residence \$ <u>Amount</u> per <u>distance</u> (attach payment schedule)
<input type="checkbox"/>	Mileage reimbursement to the parent/guardian under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)

- No Transportation: Mark when no transportation is provided as part of this agreement.
- Transportation Provided by District of Choice/Placement: Indicate the means by which the District of Choice/ Placement is providing transportation for the student.
- Transportation Provide by District of Residence: Indicate the means by which the District of Residence is providing transportation for the student.

SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF ATTENDANCE

Indicate which scenario is occurring

Type of Agreement (Check one and indicate the annual amounts of Regular Education, Special Rate and Total Annual Tuition)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
<input type="checkbox"/> Parent/Guardian Request	<i>The annualized rate for tuition, in accordance with Title 20, Chapter 5, Part 3, MCA</i>		
<input type="checkbox"/> Discretionary – Parent/Guardian requests to enroll student outside District of Residence	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Student to attend same school system as high school or elementary age sibling(s) attends	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Student lives closer to school of choice and at least 3 miles from resident district school AND District of Residence does not provide transportation	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mandatory – Geographic barrier prohibits attendance in District of Residence	\$ _____	\$ _____	\$ _____

The annualized rate for tuition, in accordance with Title 20, Chapter 5, Part 3, MCA

Type of Agreement (Check one and indicate the annual amounts of Regular Education, Special Rate and Total Annual Tuition)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
<input type="checkbox"/> Group Home Placement	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> District to District Placement	\$ _____	\$ _____	\$ _____

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged as indicated in Sections III and IV.

<p>A. DISTRICT OF ATTENDANCE Indicate approval or disapproval of the attendance agreement</p> <p>The Board of Trustees: the attendance agreement</p> <p>____ APPROVES this Out-of-district Attendance Agreement</p> <p>____ DISAPPROVES this Out-of-district Attendance Agreement</p> <p>Board Chair _____</p> <p>Signature _____ Date: _____</p>	<p>The District of Attendance must have the agreement reviewed by the Board of Trustees, and the agreement signed by the Board Chair.</p>
<p>B. DISTRICT OF RESIDENCE Indicate approval, disapproval, or receipt of the attendance agreement</p> <p>The Board of Trustees: receipt of the attendance agreement</p> <p>____ APPROVES this Out-of-district Attendance Agreement</p> <p>____ DISAPPROVES this Out-of-district Attendance Agreement</p> <p>____ ACKNOWLEDGES receipt of this Out-of-district Attendance Agreement</p> <p>Board Chair _____</p> <p>Signature _____ Date: _____</p>	<p>The District of Residence must have the agreement reviewed by the Board of Trustees, and the agreement signed by the Board Chair.</p>

District of Residence Determination 1-1-215, MCA (check one):

<input type="checkbox"/>	The residence of the minor’s parents.
<input type="checkbox"/>	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody.
<input type="checkbox"/>	If neither parent has legal custody, the residence of the legal guardian or custodian appointed by a court of competent jurisdiction (not a foster parent).
<input type="checkbox"/>	The district of residence for a child following the termination of parental rights and before a permanent placement is accomplished is the physical location of the district court that ordered termination.
<input type="checkbox"/>	The district of residence of a child whose custodial parent is incarcerated is the school district where the custodial parent resided prior to incarceration.
<input type="checkbox"/>	If there are questions concerning legal residency, consult with the agency responsible for the child’s placement in the district.
<input type="checkbox"/>	In the case of controversy, the district court has jurisdiction over residence.

Indicate how the district of residence was determined for the student

Completing an FP-14.2 Attendance Agreement

If a student's representative is a State Agency or Court, complete each section accordingly:

SECTION I: TO BE COMPLETED BY OFFICIAL OF STATE AGENCY/COURT

I request that the following student be allowed to attend a school district outside the student's district of residence:

Indicate parental status

Student Name (last, first, middle initial) Full legal name of the student		Birthdate Birthdate of the student
ADDRESS OF FOSTER/GROUP HOME	Student Address The physical address of the foster home or group home	
Complete one of the following using the District of Residence determination on page 2:		
<input type="checkbox"/> PARENTAL RIGHTS NOT TERMINATED	Parent Address The physical address of the student's parents	
<input type="checkbox"/> PARENTAL RIGHTS TERMINATED	Address of Court The physical address of the court which is overseeing the student	
PLACING AGENCY	Name of Agency Name of the agency which is responsible for the student (e.g., DPHHS, CPS)	
	Name of Caseworker Name of the caseworker assigned by the overseeing agency	Phone Number Phone number of caseworker
	Agency Address The physical address of the agency	
SIGNATURE	Signature of Official of State Agency/Court Signature of state agency official (caseworker) or the court Date: _____	

SECTION II: TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Student State ID The state ID assigned to the student in AIM (the state student information system)	Student Grade The grade the student is assigned for the enrollment period
District of Choice/Placement The district in which the student is enrolling, which is not their district of residence	District of Residence The district the student would attend based on residency
Individual Making Request <input type="radio"/> Court Indicate who is initiating the request <input type="radio"/> State Agency	Student Placement <input type="radio"/> Group Home Placement Indicate placement scenario <input type="radio"/> Foster Home Placement
Enrollment Start Date The date instruction will begin in the District of Attendance	Annual Pupil Instruction Days The total number of instructional days in the regular school year at the District of Attendance

SECTION III: TRANSPORTATION – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

NO TRANSPORTATION will be provided.

Indicate which scenario is occurring

Transportation Provided by District of Choice/Placement <input type="radio"/> Bus Service at No Cost <input type="radio"/> Bus Service, charging <input type="checkbox"/> District of Residence \$ <u>Amount</u> per <u>distance</u> (attach payment schedule) <input type="radio"/> Bus Service, charging State of Montana \$ <u>Amount</u> per year (over-schedule costs only – attach documentation of costs) <input type="radio"/> Mileage reimbursement under a TR-4 Individual Transportation Contract (3 miles from school/bus stop)
Transportation Provided by District of Residence <input type="radio"/> Bus Service at No Cost <input type="radio"/> Mileage reimbursement under a TR-4 Individual Transportation Contract (more than 3 miles school/bus stop)

SECTION IV: TUITION COSTS – TO BE COMPLETED BY DISTRICT OF CHOICE/PLACEMENT

Type of Agreement (Enter the annualized tuition rate for each section)	Regular Education Rate	Special Rate (Attach FP-14A)	Total Annual Tuition (Regular Education Rate + Special Rate)
Foster/Group Home Placement	<u> </u> \$ <u> </u> (District of Residence)	<u> </u> \$ <u> </u> (State of Montana)	\$ <u> </u> (Total)

The annualized rate for tuition, in accordance with Title 20, Chapter 5, Part 3, MCA

SECTION V: AGREEMENTS AND SIGNATURES

Transportation and tuition will be charged as indicated in Sections III and IV.

<p>A. DISTRICT OF CHOICE/PLACEMENT <i>Indicate approval or disapproval of the attendance agreement</i></p> <p>The Board of Trustees: _____</p> <p>_____ APPROVES this Student Attendance Agreement</p> <p>_____ DISAPPROVES this Student Attendance Agreement</p> <p>Board Chair _____</p> <p>Signature _____ Date: _____</p>	<p>The District of Attendance must have the agreement reviewed by the Board of Trustees, and the agreement signed by the Board Chair.</p>
<p>B. DISTRICT OF RESIDENCE <i>Indicate receipt of agreement</i></p> <p>The Board of Trustees: _____</p> <p>_____ ACKNOWLEDGES receipt of this Student Attendance Agreement</p> <p>Board Chair _____</p> <p>Signature _____ Date: _____</p>	<p>The District of Residence must have the agreement reviewed by the Board of Trustees, and the agreement signed by the Board Chair.</p>

District of Residence Determination (check one or more of the following):

	The residence of the minor’s parents
	If one of the parents is deceased or the parents do not share the same residence, the residence of the parent having legal custody
	If neither parent has legal custody, the residence of the legal guardian or custodian appointed by a court of competent jurisdiction
	The district of residence for a child following the termination of parental rights is the physical location of the district court that ordered the termination in accordance with 40 Opinion Attorney General No. 69 at 277 (1984).
	If there are questions concerning legal residency, consult with the agency responsible for the child’s placement in the district.
	In the case of a controversy, the district court has jurisdiction over residence

Indicate how the district of residence was determined for the student

Completing an FP14A Tuition Calculation

The FP14A must be completed to calculate special tuition rates. The FP14A is a supplemental form to be used in conjunction with the FP14.1 or FP14.2. After completing the FP14A, input the rate calculated in the FP14.1 or FP14.2 forms in the appropriate areas (listed as “Special Rate (Attach FP-14A)”). The form should be used to calculate Special Education tuition rates *or* programs exceeding average district cost for students without disabilities.

Section I: Student Information

- Input the school year that the attendance agreement is for
- Enter the student information

SPECIAL TUITION RATES (FP-14A)

School Year 20XX - 20XX

SECTION I: STUDENT INFORMATION

<p>(1) Student Name (Last, First, MI)</p> <p style="color: red; text-align: center;">Student Name</p>	<p>(2) Birthdate (mm/dd/yyyy)</p> <p style="color: red; text-align: center;">Student Birthdate</p>	<p>(3) Grade</p> <p style="color: red; text-align: center;">Student grade at time of attendance</p>	<p>(4) State ID</p> <p style="color: red; text-align: center;">Student State ID</p>
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Section II: The three options for calculating the special education tuition rate

- Option A: At Least Half-Time Special Education Services
 - Calculate the set rate using the actual hours per week and the regular education tuition rate. The applicable tuition rate can be found at the School Finance [Tuition and Attendance webpage](#) under the “Guidance” section.

SECTION II: SPECIAL EDUCATION ADD-ON RATE (CHOOSE ONE: OPTION A, B, OR C)

Option A – At Least Half-Time Special Education Services (max 30 hours per week, 15 if PK or KH)

(5)	PK or KH, 7.5-15 hrs/week on IEP	$[(___ \text{ hrs per week}/15) \times (\text{regular education tuition rate})]$	\$
(6)	Grades KF-8, 15-30 hrs/week on IEP	$[(___ \text{ hrs per week}/30) \times (\text{regular education tuition rate})]$	\$
(7)	Grades 7-8 (accredited), 15-30 hrs/week on IEP	$[(___ \text{ hrs per week}/30) \times (\text{regular education tuition rate})]$	\$
(8)	Grades 9-12, 15-30 hrs/week on IEP	$[(___ \text{ hrs per week}/30) \times (\text{regular education tuition rate})]$	\$
(9)	Option A - Total Special Rate		\$

- Option B: Actual Cost of Unique Special Education Services
 - Allowable costs of service are those unique to the student, including specialized one-on-one staff, equipment, and supplies.
 - Unallowable costs are ordinary special education services, such as teacher salaries and benefits and commonly used special education equipment.

Option B – Actual Cost of Unique Special Education Services

	Services	Explanation of Details	Cost
(10)	Staff Salary (Usually One-on-One)	Provide details as to the components of this cost if applicable	\$
(11)	Staff Insurance and Workers’ Comp.	Provide details as to the components of this cost if applicable	\$
(12)	Support Services Salary	Provide details as to the components of this cost if applicable	\$
(13)	Support Services Insurance and Workers’ Comp.	Provide details as to the components of this cost if applicable	\$
(14)	Special Assistive Technology and Equipment	Provide details as to the components of this cost if applicable	\$
(15)	Special Supplies	Provide details as to the components of this cost if applicable	\$
(16)	Other (Explain)	Provide details as to the components of this cost if applicable	\$
(17)	Total Actual Cost (Annual)	Sum (10) through (17)	\$
(18)	Subtract:	120% of the Tuition Per ANB amount (1/2 for PK or KH)	\$
(19)	(17 minus 18) Option B - Total Special Rate		\$

- Option C: Specialized School District Programs
 - OPI approval is required to use this rate. You will have to submit the FP14A, program details, and budget details to the OPI for approval. Please contact the School Finance team at opischoolfinance@mt.gov for additional guidance.

Option C – Specialized School District Programs (Requires OPI Approval)

	Services	Explanation of Details	Cost
(20)	Per Pupil Program Cost (Annual)	Provide details as to the components of this cost if applicable	\$
(21)	Subtract 120% of the Tuition Per ANB amount (1/2 for PK or KH)		\$
(22)	(20 minus 21) Option C - Total Special Rate		\$

Section III: Programs exceeding average district cost – students without disabilities

SECTION III: PROGRAMS EXCEEDING AVERAGE DISTRICT COST – STUDENTS WITHOUT DISABILITIES

	Services	Explanation of Details	Cost
(23)	Staff Salary	Provide details as to the components of this cost if applicable	\$
(24)	Staff Insurance and Workers' Comp.	Provide details as to the components of this cost if applicable	\$
(25)	Support Services Salary	Provide details as to the components of this cost if applicable	\$
(26)	Support Services Insurance and Workers' Comp.	Provide details as to the components of this cost if applicable	\$
(27)	Special Equipment	Provide details as to the components of this cost if applicable	\$
(28)	Special Supplies	Provide details as to the components of this cost if applicable	\$
(29)	Other (Explain)	Provide details as to the components of this cost if applicable	\$
(30)	Total Actual Cost (Annual)	Sum (23) through (29)	\$
(31)	Subtract 120% of the Tuition Per ANB amount (1/2 for PK or KH)		\$
(32)	(30 minus 31) Programs Exceeding Av. District Cost - Total Special Rate (\$2,500 max)		\$

Completing an FP15 Tuition Report

The FP15 is to be used when a student attends a day program or other school outside of their district of residence, and neither the district nor the school or program count that student for state payment in the due course of the year, and the district has paid out tuition for that student. The FP15 tuition report *must be submitted with evidence of school cost*. The Office of Public Instruction reviews the submission and determines the amount that the District of Residence is entitled to. The report is returned to the District of Residence:

- a. Out of State Tuition: 20-5-323, MCA
- b. Day Treatment Tuition: 20-5-324, MCA

To be eligible for reimbursement, the students claimed must meet the below criteria:

- They were enrolled in the District of Residence on a Count Date or both count dates.
- They were not counted for ANB – run the report or the view for students not imported into MF from AIM and check to make sure they are not in the list. This is also indicated in Infinite Campus if Exclude for Fall or Spring ANB is selected.
- They have a valid IEP as of the Count Date. An IEP progress report is not an extension of the IEP.
- The student was not claimed by an in-state facility for reimbursement.

Complete the FP15 tuition report with the information for the student’s year of attendance.

Sending Documents to the OPI

When agreements are complete, or if rates must be approved (Option C), please submit documents securely via the File Transfer Service.

How to Send the file(s) via Files Transfer Service

1. Go to <https://transfer.mt.gov/Transfer/Sent>

- a. You will have to register if you have not already.
2. Select "Send a New File"
3. Upload the file(s) you wish to send.
4. Select "Continue"
5. Select the recipient option "General" or "State Employee"
6. Complete the recipient information
 - a. Please send these documents to Andrea Mohammadi at andrea.mohammadi@mt.gov
7. Input a brief message which details the file information.
8. Select "Send"
 - a. Send a confirmation email to opischoolfinance@mt.gov to inform OPI that the submission is complete.
 - b. You may also simply reply to any existing email chains on the appropriate subject matter.

Questions?

For additional assistance, please contact the School Finance team.

- Andrea Mohammadi
 - andrea.mohammadi@mt.gov
 - 406-444-1960
- Enly Kavis
 - enly.kovis2@mt.gov
 - 444-444-1579
- OPI School Finance
 - opischoolfinance@mt.gov