Dear Guardian or Education Decision Maker,

Welcome to our school and school district. Students in foster care are provided the same educational services as all students. Additionally, students in foster care have certain educational rights. The district staff member and child welfare agency staff member listed here will help introduce you to the educational programs for students in foster care and make sure services are provided. They will also help you to complete forms or request records we may need, such as previous school and immunization records.

District Contact: __________________________________________________________________________
Phone: ___________________________________ Email: ________________________________________

Child Welfare Agency contact: _________________________________________________________________
Phone:  _________________________________________ Email: ____________________________________

Our school and school district provide the same educational services to all students without regard to their home living situation. Students in foster care do not have to attend a separate school. They have the right to be in all programs that they qualify for. Students in foster care also have rights that include:

- Based on what is best for the child or youth, the child or youth can continue to attend the “school of origin” or be immediately enrolled in any public school where the student now lives. This includes any school that students who are not in foster care attend that is in the area where the child or youth now lives.
- Being given services without delay, such as transportation and meal programs.
- Other appropriate services and programs, such as programs for:
  - gifted children;
  - children with disabilities;
  - English learners;
  - career and technical education;
  - and preschool.
- Help in school through the district’s federally funded Title I program.
- School activities for parents or guardians and family engagement.
- Participation in athletics, fine arts, or other extra-curricular activities.
- Being treated the same as students who are not in foster care by school personnel;

Your student can immediately enroll in school while education records and information are being obtained. The student may attend the school of origin, the last school attended, or the school in the attendance zone where the student is currently living. A list of schools the student may attend is included at the end of this letter.

‘School of origin’ means the school the student attended before entering foster care or the school the student last attended, including a preschool. When the student completes the final grade level of a school of origin, then ‘school of origin’ means the school the student would attend at the next grade level. The district must consider what is best for the child or youth when making a decision about which school the student will attend. Placement at the school of origin must be a choice unless doing so is not what is best for the student or is against the wishes of the student, guardian, or education decision maker.
Placement Request and Recommendation

Student Name: ________________________________________________ Date of Birth: __________________ (mm/dd/yyyy)

Guardian or Education Decision Maker: ____________________________________________

Address or Location: ____________________________________________________________

Phone: _______________________________ Email: ______________________________

The district will keep a student at the school of origin whenever possible unless it is against the wishes of the student, guardian, or education decision maker. Also, a student might not be placed in the school of origin if the school district and child welfare agency determine that it is not what is best for the student. The student may attend any of the schools listed below.

1. School of origin: ____________________________________________________________

2. Last school attended: ______________________________________________________

3. School zone where child lives: ____________________________________________

4. Other school child may attend: ____________________________________________

To be completed by school or district staff:

The school district and child welfare agency recommends that the student be placed in: ____________________________ school.

If you do not agree with the recommended placement, you have the right to appeal (ask to change) this decision. Appeals are made to the district contact or child welfare agency contact named on the first page. You will be given more information and help to appeal. The student will be immediately enrolled in the school requested by the student, guardian, or education decision maker while the appeal is being considered.

We look forward to having you attend our schools. We want guardians of students in foster care to become actively involved in their foster child’s education and in our schools.

Welcome!
School District Placement Decision

Student Name: ________________________________________________ Date of Birth: ____________________  
(mm/dd/yyyy)

Guardian or Education Decision Maker: ________________________________________________________________

Address or Location: _____________________________________________________________________________

Phone: __________________________________________ Email:  ____________________________________

Placement Requested:  _________________________________________________________________________

District and child welfare agency recommended placement:  _________________________________________

The school district and child welfare agency feel that it is in the student’s best interests to attend the school  
listed above. This decision was made because we believe it is what is best for the child. Here are the reasons for  
that decision:

You have the right to appeal (ask to change) the placement decision. During an appeal, a student must be  
immediately enrolled in the school chosen by the student, guardian, or education decision maker while the  
appeal is being considered.

☐ I want to appeal the school district’s placement decision
☐ I do not want to appeal the school district’s placement decision

Guardian or Education Decision Maker Signature:  _______________________________ Date: ________________  
(mm/dd/yyyy)

Please contact one or both of the following people to begin the appeal process:

District Contact: ____________________________________________________________________________

Phone:  _________________________________________ Email: ____________________________________

Child Welfare Agency contact: _________________________________________________________________

Phone:  _________________________________________ Email: ____________________________________
School: ____________________________________________
Address or Location: ____________________________________________

School: ____________________________________________
Address or Location: ____________________________________________

School: ____________________________________________
Address or Location: ____________________________________________

School: ____________________________________________
Address or Location: ____________________________________________

School: ____________________________________________
Address or Location: ____________________________________________

School: ____________________________________________
Address or Location: ____________________________________________