School Year 20__ - 20__

SECTION I: DISTRICT INFORMATION

District Name	LE Number
District Contact	Contact Phone
Email Address	

SECTION II: RESIDENT STUDENTS ATTENDING OUT OF STATE

Student Name	State ID	Grade	Enrollment Start	Enrollment End	Tuition Paid by	OPI Approved
			Date	Date	District	Tuition **
1.						
2.						
3.						
4.						
5.						
6.						
					Total Tuition Paid	

SECTION III: RESIDENT STUDENTS ATTENDING DAY TREATMENT PROGRAMS

Student Name	State ID	Grade	Enrollment Start	Enrollment End	Tuition Paid by	OPI Approved Tuition **
			Date	Date	District	Tuition **
1.						
2.						
3.						
4.						
5.						
6.						
		·	·	·	Total Tuition Paid	



SECTION IV: AGREEMENTS AND SIGNATURES

A. DISTRICT OF RESIDENCE
The above students are resident students attending in another district out of state for the year indicated and the district paid tuition for their
attendance; OR the above students are resident students attending a day treatment program under an approved IEP at a private, non-sectarian
school for the year indicated and the district paid tuition for their attendance.
Print name of Board Chair:
Signature of Board Chair:
B. SUPERINTENDENT OF PUBLIC INSTRUCTION
Acknowledges receipt of the above agreement and authorizes payment for students approved under this agreement.
Print name of OPI Representative:
Signature of OPI Representative:
C. COUNTY SUPERINTENDENT
Acknowledges receipt of the Tuition Report.
Print name of County Superintendent:
Signature of County Superintendent:

Instructions:

- 1. District of Residence completes applicable Sections I, II and III (attach copies of invoices for each student). Attach additional copies of page 1 if necessary.
- 2. The Board Chair of the District of Residence completes Section IV. The District of Residence returns the report to the Office of Public Instruction.
- 3. The Office of Public Instruction reviews the report and determines the amount of tuition the District of Residence is entitled. The report is returned to the District of Residence:

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

4. The District of Residence sends a copy of the report to the County Superintendent for their records.

**NOTE: Tuition payments are made for students enrolled in the district either on the Fall or Spring Count Date and the payment is the lesser of the amount of DSA the district would have been eligible for had the student been enrolled in the district or the amount of tuition paid by the district. This document contains confidential information. The OPI's Student Records Confidentiality Policy requires the safeguarding of all student records. Forms submitted to the OPI should be clearly marked "Confidential" on the envelope.