WESTON PUBLIC SCHOOLS
WESTON, MASSACHUSETTS
“INTENT TO RESIDE”

DATE: ____________

Office of the Superintendent of Schools
89 Wellesley Street
Weston, MA 02493

It is my intention to become a resident of the Town of Weston on or before ____________________________ of this school year and I request admission of the following member(s) of my family as a student(s) in the Weston Schools beginning ____________________.

Student ___________________________________________ Grade ______________

Student ___________________________________________ Grade ______________

Student ___________________________________________ Grade ______________

I have read, understand, and agree to abide by the following Weston Public Schools requirements governing prospective residents:

The children of families who have signed a contract to dwell in a residence in the Town may be enrolled up to 45 school days in advance of the time actual residence occurs by paying one quarter of a year's tuition at the time of enrollment. Presentation of a certified proof of a year's contract to dwell is required prior to registration of children. If residence occurs within the 45 school day period, the tuition deposit will be refunded. If residence occurs later than this period after enrollment, tuition will be charged at the prescribed full rate for each school day of non-residence in excess of the 45 day period. The superintendent may require a deposit for less than a 45 school day period subject to review of the residency circumstances.

I further agree to furnish a deposit, payable to the TOWN OF WESTON, for $ ________________ (see rates below), representing ___ school days tuition for each of the students named above.

Signature __________________________________________

Present Address _______________________________________

Present Telephone ______________________________________

Proposed Weston Address ________________________________

2016-2017

<table>
<thead>
<tr>
<th>TUITION RATES</th>
<th>PER STUDENT</th>
<th>ANNUAL</th>
<th>PER SCHOOL DAY</th>
<th>45 SCHOOL DAY</th>
<th>DEPOSIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIGH SCHOOL (9-12)</td>
<td></td>
<td>$17,822.00</td>
<td>$99.01</td>
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<td>$4,455.45</td>
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<tr>
<td>MIDDLE SCHOOL (6-8)</td>
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<td>$16,597.00</td>
<td>$92.21</td>
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<td>$4,149.45</td>
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<tr>
<td>ELEMENTARY SCHOOL (1-5)</td>
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<td>$15,315.00</td>
<td>$85.09</td>
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<td>$3,829.05</td>
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<tr>
<td>KINDERGARTEN (K)</td>
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<td>$11,374.00</td>
<td>$66.13</td>
<td></td>
<td>$2,975.85</td>
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</tbody>
</table>

SEND THIS COMPLETED FORM TOGETHER WITH PROOF OF RESIDENCY AND YOUR CHECK PAYABLE TO THE TOWN OF WESTON, to Weston Public Schools, Business Office, 89 Wellesley Street, Weston, MA 02493

5/20/2016