Dr. David Clendening
Superintendent

Dr. Brooke Worland
Assistant Superintendent

Ms. Tina Jobe-Gross
Chief Financial Officer

Mr. Matt Sprout
Executive Director of Technology

Mr. Benji Betts
Executive Director of Operations

Transfer Tuition Criteria and Procedure
2025 - 2026

Franklin Community Schools recognizes its position as a growing district, and furthermore realizes the very distinct possibility that parents and students from outside our district may have an interest in attending our schools. As a result, we have developed this Tuition Criteria and Procedure policy.

Procedure
Parents living outside the boundaries of the Franklin Community Schools district who wish their child(ren) to attend Franklin Community Schools must complete the application for transfer tuition status and ***return to*** **the superintendent located at the Administration Office, 998 Grizzly Cub Dr., Franklin, IN 46131** *or* **email to Natalie Campbell at campbelln@franklinschools.org.**

Applications will be processed as received and parents will be notified as to the recommendation of the school administration.
Deadline for application submission:
  Deadline to enroll for 1st Semester: September 5, 2025
  Deadline to enroll for 2nd Semester: January 20, 2026

Along with the application, please provide proof of residency (utility bill, bank statement, etc.) that is dated within 60 days of application and shows your name and home address.

Criteria
The superintendent may deny a request for a student to transfer to Franklin Community Schools if the student has been suspended or expelled during the twelve (12) months preceding the student's request to transfer under this section:
1) for ten (10) or more school days;
2) for a violation under IC 20-33-8-16 (possession of firearms, deadly weapons, or destructive devices)
3) for causing physical injury to a student, a school employee, or a visitor to the school;
4) for a violation of a school corporation's drug or alcohol rules; or
5) if the student has been absent 5 or more days in the current or previous semester, or 10 or more days in the current or previous school year.

FRANKLIN
COMMUNITY SCHOOLS
Student-Centered · Innovative

Application for Transfer Tuition
2025 – 2026

Parent, Guardian or Custodian: _____

Address: _____
 Street   City   Zip

School District Living In: _____   Phone: _____

	Student Name	Date of Birth	Attend FCS Last School Year (Yes or No)	Grade level for **2025-2026**	SCHOOL TO ATTEND Elementary: **(K-4) Rank Top 3 Choices (1-2-3)** Secondary: Choose by grade level
1)					ELEMENTARY (K-4) Mark Choices as 1-2-3 ___Creekside ___Needham ___Northwood ___Union ___Webb ___CBIS (5-6) ___FCMS (7-8) ___FCHS (9-12) ___Virtual School (K-12)
2)					ELEMENTARY (K-4) Mark Choices as 1-2-3 ___Creekside ___Needham ___Northwood ___Union ___Webb ___CBIS (5-6) ___FCMS (7-8) ___FCHS (9-12) ___Virtual School (K-12)
3)					ELEMENTARY (K-4) Mark Choices as 1-2-3 ___Creekside ___Needham ___Northwood ___Union ___Webb ___CBIS (5-6) ___FCMS (7-8) ___FCHS (9-12) ___Virtual School (K-12)

1. Why are you seeking tuition status in Franklin Community Schools?

2. Has the student ever been subject to disciplinary action related to school suspension, expulsion or attendance in the last twelve (12) months? If so, please state the reasons for that action, the date(s) of occurrence(s), and the discipline carried out by the school.
 _____ Yes   _____ No

In submitting this application, I am indicating that I understand the conditions of possible enrollment of my child as a tuition student in Franklin Community Schools. I understand that the School Corporation reserves the right to review annually continued placement of my child who is admitted to FCS. **Further, I am responsible for transportation of my child to and from school. You must provide proof of residency (utility bill, bank statement, etc.) with this application. Deadline to enroll for 1st semester: September 5, 2025. Deadline to enroll for 2nd semester: January 20, 2026.**

I understand that final approval of the application is subject to approval by the superintendent of Franklin Community Schools.

_____   _____
Parent Signature   Date