



**STATEMENT OF UNDERSTANDING for FULL-DAY, FEE-FOR-SERVICE KINDERGARTEN  
SCHOOL DISTRICT NO. 1J, MULTNOMAH COUNTY, OREGON for the  
2008-2009 SCHOOL YEAR For transfer families only**

I certify that my Student is an  Intra-District Transfer Student ("PPS Resident")  Inter-District Transfer Student ("Non-resident").

Transfer applicants to \_\_\_\_\_ [school name] full-day, fee-for-service kindergarten ("Program") are required to sign this Statement of Understanding ("SOU") and submit it to the named school (and to all requested schools with fee-based kindergarten) by 4:00 PM on March 7, 2008, to be considered in the school choice lottery. Transfer applicants must complete a School Choice Form by 5:00 PM on March 7, 2008.

The Program has tuition of \$2,880/year, \$320/month, in addition to a \$100 administrative fee. Both tuition and admin fee are non-refundable. This Program is tuition-supported. If there are insufficient tuition-paying families to cover its costs, the District will discontinue the Program. If the Program is discontinued, District will refund your administrative fee, and the named school will offer a half-day, no-fee kindergarten program.

In the unlikely event that the District cannot offer tuition-based kindergarten in the 2008-09 school year, the full administrative fee will be refunded and the contract will be terminated.

**I understand and agree to the following conditions as indicated by my initials in the blank next to each statement below:**

**Payments**

- \_\_\_\_\_ A. The tuition for the Program **does not** include the administrative fee of \$100 or childcare costs.
- \_\_\_\_\_ B. The tuition fees for the year are billed over nine months: September through May.
- \_\_\_\_\_ C. Consequences for failure to make tuition payments:
  - Resident transfer students will cease participation in the fee-for-service program on the first school day following the 10<sup>th</sup> day of the second month of not paying tuition; and will return to a half-day session at their neighborhood school unless the principal of the transfer school allows the student to remained enrolled in the half-day session at the transfer school.
  - Non-resident students will cease participation in the fee-for-service program on the first school day following the 10<sup>th</sup> day of the second month of not paying tuition; and must return to their resident district unless the principal of the transfer school allows the student to remain enrolled in the half-day session at the transfer school for the balance of the year.

**School choice**

- \_\_\_\_\_ D. All transfer applications for the Program will be selected by a random, central lottery. Students assigned by the lottery will be conditionally approved to attend the program pending finalized program decisions. Upon receiving a lottery results letter indicating an approved transfer to the Program, you will have 10 days to provide the District with a \$100 non-refundable admin fee and sign an agreement for the Program. Failure to do so means your Student will be denied the requested transfer and the next student on the wait list will be called.

**Tuition Waivers**

- \_\_\_\_\_ E. Tuition waivers are assigned by random lottery based on student eligibility and availability of slots.
- \_\_\_\_\_ F. **Tuition waivers are not available to Non-resident students.**
- \_\_\_\_\_ G. Neighborhood students receive first consideration for tuition waivers
  - Some schools may need to offer most of their tuition waiver slots to neighborhood families leaving few or no tuition waiver slots available to transfer families.
  - Some schools have few neighborhood families requiring tuition waivers and have more tuition waiver slots for transfers.
  - For more information about availability of tuition waivers, please call the school.
- \_\_\_\_\_ H. Tuition waiver eligibility is based on federal income guidelines of the Free and Reduced Lunch (FRL) program. All families requesting a tuition waiver must complete a 2008-09 FRL application. If your family qualifies, your Student will be eligible for one of the tuition waiver slots, based on availability. If your family does not qualify, you will be required to pay tuition.
- \_\_\_\_\_ I. If available, you may request the half-day kindergarten (tuition-free) as a school choice, in addition to the full-day kindergarten.

**Please initial appropriate line (you must complete this section):**

- \_\_\_\_\_ **I will not apply for a tuition waiver.**
- \_\_\_\_\_ **I will apply for a tuition waiver**, and I understand I must qualify for the Free and Reduced Lunch Program to receive a full tuition waiver. I also understand that if no tuition waiver slots are available, I will be placed on a waiting list.

By signing below, I agree that I have read and understand the above program statements and explanation and wish to enter my child into the selection process indicated above. I further agree to provide the District with additional information about my household as may be required and which is allowed by law to assist in determining my eligibility for these services.

**STUDENT AND PARENT/GUARDIAN CONTACT INFORMATION**

\_\_\_\_\_  
Student Printed Name

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Address, City, State, ZIP

\_\_\_\_\_  
Phone(s), Email

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date