

**EDUCATIONAL STABILITY AGREEMENT FORM (FS-72A)**

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Grade: \_\_\_\_\_ IEP?  Yes  No    504 Plan?  Yes  No    EST?  Yes  No

Legal Parent's Town of Residence: \_\_\_\_\_

Foster/Kinship Caregiver's Town of Residence: \_\_\_\_\_

 The student will remain in their school of origin:

School: \_\_\_\_\_ Supervisory Union/School District: \_\_\_\_\_

 The Local Education Agency (LEA) is changing to:

School: \_\_\_\_\_ Supervisory Union/School District: \_\_\_\_\_

**If the student's team is considering a change of schools, the [FS-72B: Educational Best Interest Determination \(BID\) Form](#) must be completed.****TRANSPORTATION ARRANGEMENTS**

Who is arranging the education transportation? \_\_\_\_\_

Who is paying for the education transportation? \_\_\_\_\_

How will the costs be billed? \_\_\_\_\_

Who will drive the student to school? \_\_\_\_\_

What is the student's school schedule? \_\_\_\_\_

What are the drop-off and pick-up times? \_\_\_\_\_

What are the student's extracurricular activities occurring before or after school?  
\_\_\_\_\_  
\_\_\_\_\_**SIGNATURES**\_\_\_\_\_  
**DCF Family Services District Director or Designee**\_\_\_\_\_  
**Date**\_\_\_\_\_  
**Superintendent or Designee**\_\_\_\_\_  
**Date**\*\*\* Email this completed form to [Alicia.Hanrahan@vermont.gov](mailto:Alicia.Hanrahan@vermont.gov) AND [Barbara.Joyal@vermont.gov](mailto:Barbara.Joyal@vermont.gov) \*\*\*