Parkrose School District 3

Code: **JECB-AR(4)** Revised: 2.23.15

Application for Nonresident Student Admission – Interdistrict Transfer with Consent of Both Affected Districts

The Parkrose Board of Directors has established that <u>20 eleventh or twelfth grade</u> resident students shall receive written consent for Interdistrict Transfer out of the district.

For Office Use Only Student ID#	
Student ID#	

Transfer Request for School Year: 2015-2016 Resident District: Parkrose School District Resident School:		
Requested Nonresident School	Requested Nonresident District	
Students Legal Name (First, Middle, Last)		
Mailing Address		
Apartment Complex	Apartment #	
City	State Zip	
Students Date of Birth (MM/DD/YY)	Students Grade Level in [2015-2016]	
Primary Phone of Parent/Guardian	Secondary Phone	
(Optional) Email address of Parent/Guardian _		
Parent/Guardian Name (Person in Parental Rel	elationship)	
Is the student currently under expulsion? \Box Y	Yes □ No	
If yes, what was the reason:		
Is there a sibling of this applicant currently atte If yes, name of sibling and school attending: _	tending in this district? Yes No	
Does the student currently have a transfer for t	the 2014-2015 school year? □ Yes □ No	
Signature of Parent/Guardian	Date	
For Office Use Only: Final Action of Resident District: Appro	oved Denied Wait list	
Reason or comments:		
Superintendent/Designee:	Date	
For Office Use Only: Final Action of Nonresident District: Apple	pproved Denied Wait list Lottery number	
Reason or comments:		
Superintendent/Designee:	Date	

5/14/14|PH