

FOR OFFICE USE ONLY: Date Received _____

TRANSFER APPLICATION / AGREEMENT

For School Year: 20__ - 20__

This application is to be completed by a parent or person standing in parental relation to a student requesting a transfer. This application must be complete for the transfer to be considered and must be submitted to the Campus Office accompanied by the student's transcripts, current report card, most current test scores, and written statement WHY request is being made.

Student Name: Last First Middle	Social Security #	Grade Level for 20__ - 20__	
Current Mailing Address: Street	Student's Age	Date of Birth	
City State Zip	Home Phone # :	Work # :	Cell # :
Name of Parents or Guardians:			
Name of school last attended (Include Principal's name, school address, & phone number):			
List any Special Services provided by school last attended (Special Education, Section 504, G/T, ESL, Bilingual, etc) :			
Please list the name(s) and grade level(s) of any siblings currently enrolled 1. _____ 2. _____ 3. _____ 4. _____		Please list the name(s) and grade level(s) of any additional applications for sibling 1. _____ 2. _____ 3. _____ 4. _____	

This request is made with the full understanding of and agreement to the following:

1. The transfer, once approved, shall remain in effect as long as the student meets eligibility criteria as referred to in the application.
2. Transfer students must abide by all rules and regulations of the District, including the *Campus Discipline Management Plan* and *Student Code of Conduct*. A transfer may be revoked for violation of the District's rules and regulations including failure to meet academic standards, or a documented pattern of poor attendance.
3. If revoked, the effective date of the revocation shall be set in accordance with the written transfer agreement. A written notice of revocation shall be sent to the school district of residence.

PARENT/GUARDIAN	
In signing this form, the parent or person standing in parental relation to the student confirms that he/she has read and understands the information listed on this form and that the information provided is accurate.	
Parent/Guardian Signature	Date

*****DO NOT WRITE BELOW THIS POINT*****

Enrollment Recommended: ____ Yes ____ No	Comments:
Signature of Principal:	Date:
____ Enrollment Approved ____ Enrollment Denied	
Signature of Superintendent:	Date:

Admin./Campus is responsible for informing parent/guardian of approved status and providing further information about enrollment. Date Parent/Guardian Notified: _____

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TRANSFER INFORMATION FOR PARENT/GUARDIAN, LOCAL POLICY FDA

AUTHORITY	The Superintendent is authorized to accept or reject any transfer requests, provided that such action is without regard to race, religion, Color, sex, disability, national origin, or ancestral language. A resident student who becomes a nonresident during the course of a semester shall be permitted to continue in attendance for the remainder of the semester.
TRANSFER REQUESTS	A nonresident student wishing to transfer into the District shall file an application for transfer each school year with the Superintendent or designee. Transfers shall be granted for one regular school year at a time.
FACTORS	In approving transfers, the Superintendent or designee shall consider availability of space and instructional staff and the student's disciplinary history and attendance records.
REVOCATION OF TRANSFER	A transfer student shall be notified in the written transfer agreement that he or she must follow all rules and regulations of the District, including those for student conduct and attendance, and that violation of the District's rules and regulations may result in revocation of the transfer agreement. The effective date of the revocation shall be set in accordance with the written transfer agreement. Written notification of any transfer revocation shall be sent to the school district of residence.
TUITION	If the District charges tuition, the amount shall be set by the Board, within statutory limits.
WAIVERS	The Board may waive tuition for a student based on financial hardship upon written application by the student, parent, or guardian. [See FP]
NONPAYMENT	The District may initiate withdrawal of students whose tuition payments are delinquent.
APPEALS	Any appeals shall be made in accordance with FNG(LOCAL) and GF(LOCAL), as appropriate.