



Application for Intradistrict Transfer

This form is to be completed by the parent/guardian and submitted to the principal of the school of the student's attendance boundary. Applications received prior to the Open Enrollment deadline in February of the year preceding the school year for which the transfer is requested will be acted on prior to consideration of open enrollment and other non-resident requests. Complete a separate form for each child.

Parent / guardian name _____

Address _____

City, State, Zip _____

Phone _____

Child's name _____

Current Grade _____ School Currently Attending _____

Requesting Transfer beginning with 20____ - 20____ School Year Grade _____

Assigned school _____

Requested school _____

The transfer of students within the school district but outside their own attendance area may be allowed under the following conditions:

1. The reason for making the transfer must be in the best interest of the child, based on the professional judgment of school officials, not simply as a means of acquiring a different teacher or school, or for the convenience of parents.
2. The class the student enters in the new school must have room available. Any intradistrict transfer student will be the first to be removed and transferred if the class size should exceed established limits during the year and a class reduction is deemed necessary. Additional class sections will not be formed as a result of transfer students.
3. Parents shall assume responsibility for the student's transportation. (In limited circumstances, you may be able to utilize bus transportation – on an existing route, at an existing stop, if there is room on the bus.)
4. Transfer decisions will be consistent with state open enrollment regulations and district open enrollment practices.

Briefly describe reason for request _____

Parent / guardian signature _____ Date _____

Parent / guardian signature _____ Date _____

Principal's recommendation (circle one)					
Assigned School	Approve	Deny	Requested School	Approve	Deny
_____ Principal signature			_____ Principal signature		

Superintendent's action (circle one)		Approve	Deny
Comment _____			
Superintendent signature _____		Date _____	