

**Application for Resident Student Admission – Intradistrict Transfer  
With Consent of both Affected Schools  
City to City**

Transfer requested for School Year 2020-2021 Student Grade Level in **2020-2021** \_\_\_\_\_

Resident School: \_\_\_\_\_ Requested School: \_\_\_\_\_

**Student Information:**

Legal Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Legal Middle Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ (MM/DD/YY) E-mail Address \_\_\_\_\_

Primary Phone of Parent/Guardian \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Parent/Guardian Printed Name (Person in Parental Relationship) \_\_\_\_\_

Is the student currently under expulsion?  Yes  No

If yes, what was the reason: \_\_\_\_\_

Is there a sibling of this applicant currently attending in this district?  Yes  No

If yes, name of sibling and school attending: \_\_\_\_\_

Does the student currently have a transfer for **the 2020-2021** school year?  Yes  No

Has the student attended a public charter school in the district for three consecutive years; finished the highest grade possible in that school; and has not attended another school outside the district since completing that grade?  Yes  No

Is, or was the student a resident of this district in the current school year?  Yes  No

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only:**

Final Action:  Approved  Denied

Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Signature of **Resident District** Transfer Officer

\_\_\_\_\_  
Date