

# KLAMATH FALLS CITY SCHOOLS

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

Revised/Reviewed:  
April 22, 2014

## Request for Resident Student Admission – Intradistrict (City to City Transfer)

Transfer requested for School Year 2017-2018 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) Student Grade Level in [2017-2018] \_\_\_\_\_

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

E-mail Address \_\_\_\_\_ School Currently Attending \_\_\_\_\_

Printed Parent/Guardian 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 2016-2017 school year?  Yes  No

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

### For Office Use Only:

Final Action of **Nonresident Principal**:  Approved  Denied

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

\_\_\_\_\_  
Nonresident Principal Signature

Final Action of **Resident Principal**:  Approved  Denied

\_\_\_\_\_  
Resident Principal Signature