

REGULATION

STUDENTS

7030.2

Transfer # _____

Application Deadline: June 30

Notification Date: By August 24

APPLICATION FOR STUDENT TRANSFER

PRESS FIRMLY when completing this form to make certain that all copies are legible.

Student I.D.# _____

Name of Student _____ Grade _____ (for year applying)

Birthdate _____ Sex _____ Transfer for School Year 20__20__

School Currently Attending _____ Current Grade _____

Transfer from _____ School To _____ School
(Home school for your residence)

Reason(s) for Request: ***(Please note that the district may request additional information and supportive documentation.)***

Name of Parent/Guardian _____

Address _____ City _____ Zip _____

Home Phone _____ Business Phone _____

I have carefully read, considered, and agree to ALL of the conditions as stated. I understand it is a criminal offense under Penal Code 37.10 to present false information or false records to enroll a student in public school.

Date

Signature of Parent/Legal Guardian

For Office Use ONLY: Approved Denied _____

Date Parent Notified _____ In Person Telephoned Mailed Copy

Distribution: White/Central Administrator Yellow/Parents Pink/Sending Principal Gold/Receiving Principal