



Grants Pass School District 7 Application for Nonresident Student Admission

Hardship Request
School Year _____

Exception to the Interdistrict Transfer Rules for Emergency Health, Safety or Welfare of Students

A student or student's parent/guardian may be granted an Interdistrict hardship transfer if the student is facing an emergency circumstance that threatens the health, safety, or welfare of the student per ORS 339.127

Student's Legal Name _____ Birth Date _____
Last First Middle

Parent/Guardian Name _____ Current Grade Level: _____

Home Address _____ Apartment # _____
Street City State Zip

Mailing Address _____ Apartment # _____
(If different) Street City State Zip

Primary Phone _____ Secondary Phone _____ Email _____

Is the student currently under expulsion? Yes No

If yes, what was the reason: _____

Expelled from which district? _____

Statement of hardship (Please attach supporting documentation):

I hereby certify the information I have provided is true. I understand it is the **responsibility of the parent/guardian to provide transportation**. If approved, this admission request may be revoked at any time by the receiving district if attendance and behavior requirements are not met.

Signature of Parent/Guardian _____ Date _____

For Office Use Only: Approved Denied
Superintendent/Designee: _____ Date: _____
Resident District _____ Receiving District _____