

# Solicitud de Transferencia de Estudiante Intra Distrito

South St. Paul  
Public Schools



South St. Paul students are assigned an elementary school based on established attendance boundaries. The intradistrict transfer process for elementary schools provides the opportunity for District 6 families to request to have students attend a school other than the one assigned by attendance boundaries.

Note: If approved, transportation arrangements are the responsibility of the parent/guardian. Transportation will not be provided by the district if your child is approved to attend an elementary school outside of your assigned attendance zone.

## INFORMACIÓN DEL ESTUDIANTE

Nombre del Niño: \_\_\_\_\_ Grado: \_\_\_\_\_ Ciclo Escolar: \_\_\_\_\_

Nombre del Padre/Representante: \_\_\_\_\_

Dirección: \_\_\_\_\_ No. del Apto: \_\_\_\_\_ Ciudad: \_\_\_\_\_ Estado: \_\_\_\_\_ Código Postal: \_\_\_\_\_

Telf. de la residencia: \_\_\_\_\_ Telf. del trabajo: \_\_\_\_\_ Núm. del Celular: \_\_\_\_\_

Correo electrónico: \_\_\_\_\_

Escuela correspondiente: \_\_\_\_\_ Solicita Transferencia a: \_\_\_\_\_

Razón de la solicitud:

Cuidado Infantil en el área de asistencia de la escuela. Dirección del centro de cuidado infantil: \_\_\_\_\_

Hermanos que asisten a la escuela. Nombre de los hermanos: \_\_\_\_\_

Otras razones – Explique:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## FIRMA DEL PADRES/REPRESENTANTES DEL ESTUDIANTE

Firma: \_\_\_\_\_

Fecha: \_\_\_\_\_

Padres/representantes del estudiante

**BUILDING STAFF PLEASE FORWARD REQUEST TO THE DISTRICT OFFICE - STUDENT INFORMATION**

## DISTRICT USE ONLY

Date received: \_\_\_\_\_

Transfer request:  Approved  Denied

The student will be enrolled in:

\_\_\_\_\_ School

\_\_\_\_\_ Grade

\_\_\_\_\_ Date

\_\_\_\_\_ Administrator Signature

\_\_\_\_\_ Date

Copies of signed forms sent to:  Student Cumulative File  Principal of Attendance School  Principal of Requested School