



In-District High School Student Transfer Request Form for Policy 3142

Applicant Information

Student Name: _____ Date: _____
Last First M.I.

Physical Address: _____
Street Address (New Address if Change of Residence) Apartment/Unit #

City State ZIP Code

Mailing Address: _____
Street Address (if different than physical address) Apartment/Unit #

City State ZIP Code

Student's Current Attendance Zone*
(Check one.) Flathead Glacier Current Grade: _____ Age.: _____ Expected Graduation Year: _____

* Based on current address or new address if change of residence.

Parent/Guardian: _____ Email _____

Transfer Request Information

Current School Attending: _____ School Year Applying For: _____ Semester Applying For.: _____

Student is requesting to transfer to: Flathead High School Glacier High School

TRANSFER DUE TO CHANGE OF RESIDENCE: Complete this section if you are requesting to remain at your current school even though the new residence is within the attendance boundaries to the other high school. Please attach proof of new address (Flathead Electric or other utility bill, rental agreement, purchase agreement). If you wish to transfer to the school zoned for your new residence, contact the guidance office at your current school for directions.

Old Address: _____ New Address: _____

Date of Move: _____ Is student moving with a parent or legal guardian? Yes No

TRANSFER WITH NO CHANGE OF RESIDENCE: Complete applicable parts in this section.

Part #1: Reason for request: Choose one of the reasons below for requesting this transfer. Both reasons **A** and **B** can be addressed if applicable.

Reason A- Mental or physical health (attach any documentation/recommendation provided by a health professional). Please provide reasoning for a mental or physical health accommodation that the new high school would provide:

Request for In-District Transfer - Reason A (from Page 1) and/or:

Reason B-Academic program offerings (must be for course offerings not offered at your current zoned high school) Please provide reasoning for academic course offerings not offered at student's current high school:

Part #2: Attach a parent letter detailing the explanation for the request or any other documentation supporting the transfer request that would assist the committee in making an appropriate decision.

Part #3: Attach the following documents to this Request Form: *

- Class schedule with current grades in all classes if a mid-year transfer is being requested
- Current schedule or most current report card if not in high school yet

*This information can be obtained and printed via Powerschool or found on our website at www.sd5.k12.mt.us

Student and Parent/Guardian Verification

The undersigned parent and student verify that the information is accurate, and all parties understand the transfer policy and related policy implications such as Montana High School Association activity eligibility.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

School District Use Only

Directed transfer by school administrator due to behavioral or safety issues.

High School Administrator Signature: _____ Date: _____

Administrative Committee Review Transfer Request Decision: Approved Denied

If denied, reason for the denial:

Did review include a Parent/Guardian and/or Student interview? Yes No

Notes:

Administrative Action:

- Flathead HS Principal Approved on ____/____/____
- Glacier HS Principal Approved on ____/____/____
- Superintendent Approved on ____/____/____