

**To the Superintendent of this District:**

I am the parent/guardian of a student enrolled in a public charter school, and I request that this student be transferred to a traditional school in this district. I understand that the transfer will be automatically approved unless either of the following is true:

1. The student should be enrolled in another school district based on school district boundaries.
2. The student's actions at the public charter school would, under this district's policies, lead to the student's expulsion or denial of enrollment.

I also understand the following:

1. If any of the student's actions at the charter school would, under this district's policies, warrant his or her expulsion or denial of attendance, the student may not be automatically approved for transfer. In such event, the student will be afforded all the due process rights as provided by law.
2. The superintendent of this district will notify me, in writing, within ten (10) days of my request for transfer whether the transfer has been approved.
3. An effort will be made to accommodate a preference for a transfer to a particular school in the district; however, enrollment at a particular school depends on a variety of factors, including space available, transportation, services for students with disabilities, and administrative considerations.
4. If I have any questions about the application or transfer process, I may contact the superintendent of this district or his or her designee.

I have completed the information requested, and I am returning this application to the superintendent of this district for his or her review.

**A. Applicant Information**

Student's name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Student's address: \_\_\_\_\_

Parent/guardian name(s): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Parent/guardian address: \_\_\_\_\_

**B. Charter School Enrollment History**

Charter school name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Charter school address: \_\_\_\_\_

Name and title of individual at charter school who can verify enrollment: \_\_\_\_\_  
\_\_\_\_\_

Last grade level completed at charter school: \_\_\_\_\_

Dates enrolled at charter school: \_\_\_\_\_

Is, or was, the student receiving special services while attending the charter school, i.e., gifted/talented, special accommodations, special education? Yes . No . If yes, please explain on a separate piece of paper.

Has the student been the subject of any disciplinary investigation or action while enrolled at the charter school? Yes . No . If yes, please explain on a separate piece of paper.

**C. School District Enrollment History**

Prior to enrolling in the charter school, what school did the student attend? \_\_\_\_\_  
\_\_\_\_\_

Address of prior school: \_\_\_\_\_

Phone number of prior school: \_\_\_\_\_

**D. School Preference**

Do you have a preference for which school in the district the student attends? Yes .  
No . If yes, please specify the school: \_\_\_\_\_

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date



**LEGAL REFERENCE:**

**ADOPTED: April 12, 2021**

**AMENDED:**