

# **ANNUAL Transfer Request FORM**

NON-RESIDENT ADMISSION Form 3141F

IN-DISTRICT
TRANSFER Form 3131F

Directions: Please type or print using blue or black ink. <u>REQUIRED documents</u>: Discipline record, attendance record & current unofficial transcript for grades 9-12 (most recent report card for grades 1-8). Turn in documents with this form.

Parent/legal guardian, complete Section I. Return completed form to the district office

|   |                        | - arcin            |  |                | •               |                                  | ar: 20 to 20                 |  |  |
|---|------------------------|--------------------|--|----------------|-----------------|----------------------------------|------------------------------|--|--|
| SECTION I   | APPROVAL IS FO         | R <u>ONE</u> SCHOO | OL YEAR <u>OI</u>                            | <u>VLY</u> .   | , ippos.        | Today's Da                       |                              |  |  |
|   | Student Information    |                    |  |                |                 | New Request                      | ☐ Renewal                    |  |  |
| Student Name:   |                        |                    |  |                |                 | Birth Date:                      |                              |  |  |
|   | Last                   | F                  | -irst  |                | M.I.            | Age:                             |                              |  |  |
| Parent/Guardian Name:   |                        |                    |  |                |                 | Grade Level (For Transfer Year): |                              |  |  |
|   | Last (Print Please)    | F                  | First  |                | M.I.            | Parent Email:                    |                              |  |  |
| Residence Address:  | Street Address         |                    |  |                |                 |                                  | Apartment/Unit #             |  |  |
|   | City                   |                    |  |                | State           | 1                                | ZIP Code                     |  |  |
| Mailing Address: (If different from above)  | MAII ING Address       |                    |  |                |                 |                                  | Apartment/Unit #             |  |  |
| (II dillerent ironi above)i   | WAILING Address        |                    |  |                |                 |                                  | Арантету Опіт <del>н</del>   |  |  |
|   | City                   |                    |  |                | State           |                                  | ZIP Code                     |  |  |
| Cell/Home Phone:  |                        | Work               |  |                | k Phone:        |                                  |                              |  |  |
|   |                        |                    |  |                |                 |                                  |                              |  |  |
| Check only ONE bo   |                        |                    |  |                |                 | Danisa da da Oad                 | 1                            |  |  |
| Neighborhood Schoo  |                        | Current S          |  | Eatopyillo Ele | monton. □       | Requested Sc                     | noor:  Eatonville Elementary |  |  |
| Eatonville Elementary  Columbia Crest A-STEM Academy  |                        | C                  | Eatonville Elem<br>Columbia Crest A-STEM Aca |                |                 | Columbia                         | Crest A-STEM Academy         |  |  |
|   | ser Elementary         |                    | Weyerhaeuser Elementary                      |                |                 |                                  | eyerhaeuser Elementary       |  |  |
| Eatonville Middle School  |                        |                    | Eatonville Middle School                     |                |                 |                                  | Eatonville Middle School     |  |  |
| Eatonville High School  |                        |                    | Eatonville High Scho                         |                |                 |                                  | Eatonville High School       |  |  |
| **NON-Resident District***  |                        |                    | Eatonville Online Academy (6th-8th)          |                |                 | Eatonville                       | Online Academy (6th-8ta)     |  |  |
| District:   |                        | Other:             |  |                | Other:          |                                  |                              |  |  |
| School:   |                        |                    |  |                |                 |                                  |                              |  |  |
|   |                        |                    |  |                |                 |                                  |                              |  |  |
| Reason(s) for the r   |                        |                    |  |                |                 |                                  |                              |  |  |
| Currently enrolled  | at requested scho      | ool Name           | of school                                    | :              |                 |                                  |                              |  |  |
| Requested school  | is closer to paren     | t's workplac       | e/daycare                                    | <b>:</b>       |                 |                                  |                              |  |  |
| Financial, Education  | onal, Safety, or He    | alth               |  |                |                 |                                  |                              |  |  |
| There is some other   | r special hardship     | or detrimenta      | al condition                                 | affecting t    | he student or   | the student's imme               | diate family which could     |  |  |
| be alleviated as a re   |                        | ·.                 |  |                |                 |                                  |                              |  |  |
| ESD Employee  | List Work site:        |                    |  |                |                 |                                  |                              |  |  |
| Services Required   | :                      |                    |  |                |                 |                                  |                              |  |  |
| I understand I am responsible   |                        | from school.       | ☐ Yes  | ☐ No           | Please initial: |                                  |                              |  |  |
| Does the student's <b>day care provider</b> reside within the requested school's boundary?                              |                        |                    | ☐ Yes  | ☐ No           |                 |                                  |                              |  |  |
| Does the student receive <b>special education</b> /related services?  |                        |                    | ☐ Yes  | ☐ No           | •               | •                                |                              |  |  |
| Has the student previously qualified for or been enrolled in a Special Service Program?                                 |                        |                    | ☐ Yes  | ☐ No           |                 |                                  |                              |  |  |
| 1.  | vious special educatio | n services pro     | vided?                                       | District Na    | •               |                                  |                              |  |  |
| In what district were the previous special education services provides the student receive <b>Section 504</b> services? |                        |                    |  | □ No           |                 |                                  |                              |  |  |
| Does the student receive <b>ELL</b> services?   |                        |                    | ☐ Yes  | ☐ No           | •               |                                  |                              |  |  |
|   |                        |                    | Yes  |                | •               |                                  |                              |  |  |
| Has the student been <b>suspended/expelled</b> at previous school?  |                        |                    | ' <b>∟</b> Yes                               | ☐ No           | If yes, explair | 1:                               |                              |  |  |

In addition to the foregoing, any intradistrict transfer or non-resident admission must be in compliance with all other district policies including those relating to student attendance, academic standards, discipline/behavior, and class size and are subject to annual review. SEE REVERSE FOR PARENT SIGNATURE AND POLICIES.

(11+ absences (0-10 absences per year) per year)

☐ No

If yes, explain:

Yes

Has the student had excessive absence issues and/or Becca

Truancy petition filed?

## Applicant Waiver Conditions for Eatonville School District (ESD)

### Applications for admission shall be reviewed based upon the following:

- A space in appropriate courses or programs at the non-resident/neighborhood school depends on availability.
- Students who reside within the Eatonville School District will be given priority for placement in special programs. In the event there is a waiting list for placement in such a program, students living outside the district will not be placed until all students who reside within the district have been placed.
- If excess enrollments make it necessary to move students to other schools within the district to adjust class size, children who live outside any school boundary may be moved to another school.
- Students must maintain passing grades and/or satisfactory academic progress in all classes at quarters, semesters, and trimesters. Poor grades may result in the discontinuance of this transfer/waiver at any time.
- Students are required to obey all school and district rules and regulations. Repeated and/or serious discipline problems will result in the discontinuance of this transfer/waiver at any time.
- If student becomes eligible for special education services while attending ESD, the student will transfer back to his/her non-resident school at the end of that school year.

Athletic Eligibility: As per Washington Interscholastic Activities Association Rules, students are not eligible for varsity competition at the high school level unless a hardship exists and subsequent appeal is granted, or unless the student has attended Eatonville School District for at least one year.

**Transportation** for students residing outside the Eatonville School District is the responsibility of the parent/guardian.

I verify that the above information is accurate and current and I understand this waiver may be rescinded if found falsified. I understand an approved district release from the student's resident district MUST BE ATTACHED. I understand this release will be in effect for the grade group requested unless rescinded. I have read and understand the conditions listed on this form and I further understand this waiver may be rescinded at any time during the year if the conditions are not met. The Eatonville School District reserves the right to revoke this transfer at any time through the school year if the student or parent does not adhere to these conditions. If it becomes necessary to change placement of the student, this agreement shall become null and void. Parent/Guardian Signature: Date:

# FOR OFFICE USE ONLY

| Superintendent/Designee Signature:                    |                       |            | Date:     |        |        |
|---|-----------------------|------------|-----------|--------|--------|
|   |                       |            |           |        | inou . |
| Having examined the above, this transf                | er request for the 20 | to 20 is:  | ☐ Approve | d 🔲 De | nied   |
| Student Services Director:                            | ☐ Approve ☐ Deny      | Signature: |           | Date:  |        |
| Requested School Principal:                           | ☐ Approve ☐ Deny      | Signature: |           | Date:  |        |
| School Principal(Neighborhood School):                | ☐ Approve ☐ Deny      | Signature: |           | Date:  |        |
| SECTION III (DISTRICT USE ONLY)                       |                       |            |           |        |        |
| If applicable, have IEP services, at the transfer sch |                       | ☐ Yes      | ☐ No      |        |        |
| Is there room in the class, core class, program or a  |                       | ☐ Yes      | □ No      |        |        |
| SECTION II (DISTRICT USE ONLY)                        |                       |            |           |        |        |

FORM 3131F/3141F Revised: 4/27/2021