

STEVENS POINT AREA PUBLIC SCHOOL DISTRICT
Stevens Point, Wisconsin



School Year 2023-2024

**REQUEST FOR SCHOOL TRANSFER /
PLACEMENT WITHIN THE SCHOOL DISTRICT**

TRANSPORTATION: The Stevens Point Area Public School District is not obligated to provide transportation for families approved for a Pupil Transfer Request (PTR).

Please Note:

- Applications are accepted **until March 1, 2023**. Application should be returned to: Attn: Pupil Transfer Request, Educational Services Office, 1900 Polk Street, Stevens Point, WI 54481.
- If a family/student changes his/her mind after a Pupil Transfer Request is granted; it becomes the school district's decision whether or not a student can attend the resident home school attendance area.
- To remain at the approved school the student must: have good behavior; have good attendance; arrive at school on time.

* **Please complete this form using black or blue ink**

Student Name _____ Date of Birth _____

Please complete a separate form for each student in family

Student Address _____ Zip Code _____

School Currently Attending _____ Home School Area _____ Current Grade _____

Seeking a School Transfer to _____ Next Year's Grade _____

Primary Guardian Name _____

Primary Guardian Address _____ Zip Code _____

Parent/Guardian Home Phone _____ Work Phone _____ Cell Phone _____

Best Time to Call _____ E-Mail Address _____

PLEASE ANSWER ALL QUESTIONS:

Yes No Does the student receive Title I services? (Note – Not all schools offer this program)

Yes No Does the student receive special education services?

Yes No Does the student receive English Language Learner (ELL) services?

REASONS FOR CHOICE REQUEST - CHECK ALL THAT APPLY:

Sibling(s) already attending: _____ Grade(s) _____
(name(s) of siblings)

Childcare reasons: _____
(name, address and phone # of childcare provider)

Other (please explain): _____

Parent/Guardian Signature _____ Date _____

Return Completed forms to: Educational Services Office, 1900 Polk Street, Stevens Point WI 54481 **on or before March 1.**

For Administrative Use:			
Director of Elementary / Secondary _____	Date _____		
Approved for _____	School Only _____	Denied _____	Reason: _____
For Office Use: address verified (circle one) Y or N Entered in DB (circle one) Y or N Letter Sent Date: _____			
Continuing or New _____	Copy Enrollment (circle one) Y or N _____	Sped Mod verified (circle one) Y or N _____	Second Family? Y or N _____