

TRANSFER REQUEST APPLICATION

All requests for transfer must be filed with the transferor school corporation (the school corporation within which the parent has legal settlement) on or before *April 1st* of the school year prior to the year for which the transfer would take effect. A transfer request shall be valid only for one (1) school year. A school corporation can grant a transfer only for one (1) year. A parent seeking transfer for a subsequent school year must submit a new transfer request application for each school year for which transfer is sought.

Date _____

Comes Now, _____ (Parent, Guardian, or

Custodian), living at _____
 Street Address City Zip Code

attending _____ within the _____
 (school name)

School Corporation (the Transferor School Corporation),

and asks that _____ *Grade _____ Date of Birth _____
 _____ *Grade _____ Date of Birth _____
 _____ *Grade _____ Date of Birth _____

be transferred to _____ in the _____ School
 (school name)

Corporation (the Transferee School Corporation) for the _____ school year.

**The grade the student will be entering.*

Grounds for Transfer

Pursuant to State statute 511 I.A.C. 1-6-3, a student may only be granted a transfer if the request is conditioned upon at least one of the following reasons:

1. A curriculum offering of the transferee high school is necessary for the student's established academic or vocational aspiration, and the same or a substantially similar curriculum offering is unavailable at the transferor's high school.

2. The transferee school offers courses that would allow the student to receive an Academic Honors Diploma, and the courses would otherwise be unavailable to that student if the student remained in the transferor school.
3. The transferor school is overcrowded and the transferee school is not. The overcrowded conditions at the transferor school must materially affect the student's opportunity to learn, while the conditions at the transferee school would be significantly less crowded.
4. The student has a medical condition that could be better accommodated by attending the transferee school rather than the transferor school. Attendance at the transferor school poses a risk of physical illness, while attendance at the transferee school would substantially reduce this risk. This would have to be supported by written documentation of two (2) persons holding unlimited licenses to practice medicine in Indiana who have personally examined the student.
5. The transferor school is not fully accredited by the State Board of Education, *and* the student's request is related to the reason that the transferor school has probationary accreditation status.

Please indicate below which of the grounds for transfer listed above is being asserted on behalf of the above-named student(s) and describe in detail why the transfer is necessary to better accommodate the student(s). (The term "better accommodated" is not defined beyond the direct relationship between a student's education and one or more of the five (5) circumstances listed immediately above. "Better accommodated" is not synonymous with convenience.)

Signed: _____ Date: _____
Parent, Guardian, or Custodian

Telephone Number: Daytime: _____

Evening: _____

Response of Transferor School Corporation

It is my opinion that the above request(s) be **APPROVED / DENIED** (circle one) for the following reason(s): _____

Signed: _____ Date: _____
Superintendent of Transferor School Corporation

Response of Transferee School Corporation

It is my opinion that the above request(s) be **APPROVED / DENIED** (circle one) for the following reason(s): _____

Signed: _____ Date: _____
Superintendent of Transferee School Corporation

*Statement of Tuition charges, should the Request be approved, to be executed on forms provided by the Indiana State Board of Accounts.

Transfer Appeal to the Indiana State Board of Education

*To be used when original request has been denied by the school corporation(s).

Appeal for approval of the request(s) for transfer is hereby made to the Indiana State Board of Education.

Signed: _____

Parent, Guardian, or Custodian

Street Address, City, Zip Code

Home Telephone

Work Telephone

Fax Number

Date: _____

Note: This must be sent by *certified mail* to the Indiana State Board of Education, Room 229, State House, Indianapolis, Indiana 46204-2798, and to the superintendents of both the transferor and transferee school corporations within ten (10) days after the receipt of the school corporation's denial.

Revised 1/06
lsc