

PARENTAL CHOICE TRANSFER REQUEST (GRADE 6 THROUGH 8 ONLY)

FOR 2024-2025 SCHOOL YEAR
SUBMIT ONE APPLICATION PER STUDENT

Deadline: March 15, 2024

Parent/Guardian: Please...

- Print information
- **Return form to: Moorpark Unified School District Enrollment Center lock box**
For information or questions, call (805) 378-6300, ext. 1501

Name of Student	Birth Date	Grade in 2024-2025
Boundary School	School Attended in 2023-2024	School Requested

Parent/Guardian Name	Relation to Student	Phone Number
Student's Residence Address	City	Zip Code

Special Education Program: ____ No ____ Yes

Please specify: (Resource Program, Special Day Class, Speech, etc.) _____

Reason for Transfer Request _____

Criteria:

- 1.) Request is approved based upon available space and maintenance of balance. All students residing within the boundary of the requested school will have attendance priority.
- 2.) Transportation for attendance at a school outside attendance area boundaries must be provided by the parent/guardian.

 Signature of Parent/Guardian

 Date

DISTRICT USE ONLY	
District Action: Granted Denied Reason: _____	
_____ Signature of District Representative	_____ Date

