DONNA INDEPENDENT SCHOOL DISTRICT 2023-2024 CAMPUS TRANSFER REQUEST

(Includes all current5th and 8th grade students and any student requesting to transfer to a different campus)

Timeline to submit: February 27 – May 26, 2023

Please Check All That Apply:

New Transfer

Continuing Transfer Request

In-District Employee

Campus must submit transfer request forms to the Intake/Student Engagement Department Office

All students requesting an in-district transfer must complete a transfer request form every year. A separate transfer request form must be completed for each child requesting a transfer within the district.

Child's full legal name (First, Middle, Last and Suffix (if applicable))

Note: Texas Law requires school systems to use the name on the child's birth certificate or name legally changed in court, please ensure the name you have entered below meets these requirements.

Name of Student:		ID#
D.O.B.:	Grade Level 2023-2024 :	
Physical Address:	City:	Zip:
Mailing Address:	City:	Zip:
Name of parent or legal guardian:		
Phone number(s):		
☐ I confirm the above address represents the le understand that parents or guardians who use a restitution to the school district or other costs or	fraudulent address for enrollmen	
Home Campus Name:	Requested Campus Name:	
Is student an Athlete Yes No; Is student a Comments:		
Is student a Dancer □Yes □No; Is student in Comments:		
Students allowed to transfer shall be subject to UIL eli responsibility of the student/parent to determine the be reviewed with campus administration, athletics or	effect of his or her transfer on UIL el	igibility status. This rule should
Transfers will be based on the following criteria ☐ Is Parent/ <u>Legal</u> Guardian employed with Do Name of Parent/Legal Guardian:		•

Campus/Department employed at: _____

FDB (EXHIBIT-A)

☐ Other (please specify reason for transfer request):		
Student transfers will be decided on a case-by-case basis; only legit It will be the parent/guardian's responsibility to provide transporta is honored.	·	
NOTE: Any inaccurate contact information at the time of processing may result in the inability to process your request.		
☐ I have read and agreed on the above terms and conditions. I un granted conditionally on student attendance including tardies, behatransfer may be revoked. (Policy FDB – Local) I understand that transfer may be revoked.	avior, academic effort and that the	
ignature of parent or legal guardian:	Date:	
STEP 1: CURRENT CAMPUS APPROVAL (New & Continuing Transpired Principal's Comments:	•	
CURRENT Campus Principal Signature: Date:		
TEP 2: REQUESTED CAMPUS APPROVAL (New Transfer Request On Principal's Comments:		
REQUESTED Campus Principal Signature:	Date:	
TEP 3: FINAL APPROVAL Form Submitted to Central	Office: Date:	
☐ APPROVED ☐ DENIED		
Superintendent's or Designee's Signature:	Date:	
STEP 4: DATA ENTRY Transferred entered into TEAMS:	Date:	

FDB (EXHIBIT-A)