

2024-25 OPTIONAL TRANSFER REQUEST

Cypress-Fairbanks ISD assigns students to schools based on the home address of their parent/legal guardian. If you would like your child to attend a school other than their zoned campus, please complete the Optional Transfer Request. Requests can only be considered for the campuses that are listed below. Approval is not guaranteed, as the school principal makes the final decision.

You will be notified of the decision within 10 business days. For questions about student transfers, contact the Office of Student Services/Admissions at (281) 517-6342.

DATE: _____ STUDENT ID: _____ CURRENT GRADE LEVEL: _____

STUDENT'S LAST NAME	FIRST NAME	M.I.	HOME CAMPUS (Zoned School)
CURRENT ADDRESS:		CITY:	ZIP:
PREFERRED CAMPUS #1:	PREFERRED CAMPUS #2:	PREFERRED CAMPUS #3:	

<u>Elementary Schools</u>				<u>Middle Schools</u>			<u>High Schools</u>	
Ault	Emery	Gleason	Horne	Lowery	Sheridan	Bleyl	Kahla	Cypress Creek
Bane	Emmott	Hairgrove	Jowell	Metcalf	Swenke	Campbell	Labay	Cypress Falls
Bang	Farney	Hancock	Kirk	Post	Walker	Cook	Salyards	Cypress Ridge
Brosnahan	Fiest	Hemmenway	Lamkin	Reed	Willbern	Dean	Smith	Cypress Springs
Copeland	Francone	Holbrook	Lee	M. Robinson	Wilson	Goodson	Thornton	Langham Creek
Danish	Frazier	Hoover	Lieder	Sampson	Yeager	Hopper	Truitt	as of 12.9.24

Parent/Guardian, please complete the following to support the review process:

1. Why are you requesting a transfer from the student's home campus? Please provide specific details to help us understand your request.

2. It is important that the home campus has had an opportunity to address the circumstances you listed above prior to the transfer being considered. Please describe any effort you have made to resolve the circumstance with the administration at your child's current campus and their responses to your efforts.

3. In most instances, bus transportation is not available for transfer students, please share how you will ensure that your child gets to school and will be picked up from school in a timely manner.

Parent/Guardian, please note the following:

- Transfers are valid for the current school year and reviewed on a yearly basis.
- Transportation is not provided. Students may be transported to/from a state recognized childcare provider, parent, or grandparent responsible for providing before and after school care if there is a district-approved stop on a district-approved route serving the transfer campus.
- Transfer students in grades 9-12 are ineligible to participate in varsity athletics for one year from the first day of attendance at the transfer campus.
- If a student with an approved transfer is withdrawn from the transfer campus, the transfer will not be in effect if the student re-enrolls in the district.
- Future requests for siblings to attend the same transfer campus are dependent on the open/closed status for a specific school year.

To ensure that our office can efficiently review and process this request, complete one transfer request per child. Then, email the completed request and any supporting documentation to studenttransferforms@cfisd.net. You will receive an automatic email confirmation that the request was received.

PARENT/GUARDIAN: My signature affirms that I have read and fully understand this information and agree to the stipulations stated above. I also understand that there are civil and criminal penalties for knowingly providing false information that could result in criminal sanctions and reimbursement.

Print Name: _____ Signature: _____

Phone Number: _____ Email: _____

FOR OFFICE USE ONLY

APPROVED _____, DIRECTOR OF ADMISSIONS DENIED _____