

DONNA INDEPENDENT SCHOOL DISTRICT

2025-2026 CAMPUS TRANSFER REQUEST

(Includes all current 5th and 8th grade students and any student requesting to transfer to a different campus)

Timeline to submit: March 17 – May 30, 2025

Please Check All That Apply:

New Transfer

Continuing Transfer Request

In-District Employee

Campus must submit transfer request forms to the PEIMS 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*)

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 2025-2026 : _____

Physical Address: _____ City: _____ Zip: _____

Mailing Address: _____ City: _____ Zip: _____

Name of parent or legal guardian: _____

Phone number(s): _____

I confirm the above address represents the legal residence of this child's parent or legal guardian. I understand that parents or guardians who use a fraudulent address for enrollment may be subject to restitution to the school district or other costs or fees under Texas law.

Home Campus Name: _____ **Requested Campus Name:** _____

Is student an Athlete Yes No; Is student a Cheerleader YES NO

Comments: _____

Is student a Dancer Yes No; Is student in Band YES No

Comments: _____

Students allowed to transfer shall be subject to UIL eligibility rules for participation in UIL activities. It shall be the responsibility of the student/parent to determine the effect of his or her transfer on UIL eligibility status. This rule should be reviewed with campus administration, athletics or fine arts director if the student participates in UIL.

Transfers will be based on the following criteria:

Is Parent/Legal Guardian employed with Donna ISD? YES NO **If yes, then complete information below:**

Name of Parent/Legal Guardian: _____

Campus/Department employed at: _____

Other (*please specify reason for transfer request*): _____

Student transfers will be decided on a case-by-case basis; only legitimate parent requests will be considered. It will be the parent/guardian's responsibility to provide transportation for the students if a campus transfer 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 understand that if approved, the transfer is granted conditionally on student attendance including tardies, behavior, academic effort and that the transfer may be revoked. (*Policy FDB – Local*) I understand that transportation to the requested school is my responsibility.

Signature of parent or legal guardian: _____ Date: _____

STEP 1: CURRENT CAMPUS APPROVAL (New & Continuing Transfer Request) **APPROVED** **DENIED**

Principal's Comments: _____

CURRENT Campus Principal Signature: _____

Date: _____

STEP 2: REQUESTED CAMPUS APPROVAL (New Transfer Request Only) **APPROVED** **DENIED**

Principal's Comments: _____

REQUESTED Campus Principal Signature: _____ Date: _____

STEP 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: _____