GATEWAY UNIFIED SCHOOL DISTRICT
4411 Mountain Lakes Blvd.
Redding, CA 96003

INTRA-DISTRICT TRANSFER FORM

Intra-District Guidelines:

For the 2026–27 school year, Intra-District transfer requests may not be approved until one to two weeks *after* the start of the school year, following the completion of enrollment for students residing within the school attendance area and confirmation of available space.

1. This request must first be submitted to the school of residence.
2. The school of residence will forward the form to the non-resident school.
3. A copy of the form will be returned to the parent after approval/denial by the non-resident school if requested.
4. Priority will be given to students living within the school attendance area.
5. Parents will be required to provide their child's transportation to and from school.
6. Intra-district transfers must be renewed annually.
7. *Student will maintain satisfactory academics, behavior and attendance.*

Does your student have an IEP? ☐ **YES** ☐ **NO** Does your student have a 504? ☐ **YES** ☐ **NO**

I request that my child attend a school other than their school of residence. School Year _____

_____ _____
Name of Student (please print) **Grade (for school year requested)**

_____ _____
School of Residence (please print) **School of Desired Attendance (please print)**

_____
Parent or Guardian (please print) **Address** **Phone**

Please indicate the reason for the request: _____

I have read the above guidelines and understand the conditions of this agreement.

_____ _____
Signature of Parent or Guardian **Date**

_____ _____
Principal Signature, School of Residence **Date** **Principal Signature, School of Desired Attendance** **Date**

_____
SPED Director, District 504 Coordinator Approval (If IEP or 504 is Active) **Date**

☐ Approved ☐ Denied ☐ Approved ☐ Denied

*Comments:_____

____Distribution: School of Residence, School of Desired Attendance, Parent/Guardian 2/2026