

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

See the following pages for forms regarding student transfers:

- Exhibit A: Non-Resident Student Request to Transfer into the District — 2 pages
- Exhibit B: Transfer Agreement — 2 pages
- Exhibit C: Non-Resident Employee's Request for Student to Transfer Into the District – 3 pages

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

EXHIBIT A

NON-RESIDENT STUDENT REQUEST TO TRANSFER INTO THE DISTRICT

NOTICE TO PERSON ENROLLING THE STUDENT: A person who knowingly falsifies information on a form required for a student's enrollment in the District shall be liable to the District for tuition or other costs, as provided in Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of false information. In addition, presenting false information or false records is a criminal offense under Penal Code 37.10.

Please complete this form for each student for whom a temporary transfer is being requested.

- ☐ This is a request for a student not currently enrolled in the District.
- ☐ This is a request for a student currently enrolled in the District but becoming a temporary nonresident.
- ☐ This is a request for an extension of a transfer previously granted.

Provide full legal name of the student and parent/guardian.

Student Name _____

Birth date _____ **Campus** _____ **Grade** _____

Parent/guardian name _____

Relationship _____

Please provide your current address and contact information.

Address _____ **City** _____ **State** ____ **Zip** _____

Email _____ **Home Phone** _____

Father's Work/Cell _____ **Mother's Work/Cell** _____

Specify the school district and campus for your current address.

School District _____ **Campus** _____

Identify the address of your new residence in Highland Park ISD.

Address _____ **City** _____ **State** ____ **Zip** _____

Date on which you expect to reside in Highland Park ISD _____

Reason for temporary absence from Highland Park ISD

- ☐ Home closing isn't until _____ (date) with move-in scheduled _____ (date)

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

- ☐ Lease doesn't begin until _____ (date) and it ends on _____ (date)
- ☐ Home is under renovation/construction with expected completion date of _____ (date)
- ☐ Other: _____

Attach additional explanatory pages, if necessary.

Attach a fully executed contract or fully executed lease or letter from the builder that includes the construction address and expected completion date.

Student's attendance record

How many days was the student absent in the school year prior to the year for which a transfer is requested? _____

If this request is for a transfer during a school year, how many days has the student missed in the current school year? _____

If the student missed more than ten percent of the days in the school year, please provide an explanation: _____

Student's behavior record

Has the student been expelled or removed to an alternative education program for one or more days in the most recent school year? ☐ Yes ☐ No

During the preceding year? ☐ Yes ☐ No

If yes to either question, for what offense(s)? _____

As a parent or person standing in the position of legal responsibility for the child named in this request, I acknowledge that I have received a copy of Highland Park ISD's policies FDA(LEGAL) and FDA(LOCAL) and the Transfer Agreement that must be executed before the child is enrolled in the District. The information provided in this form is true and factual to the best of my knowledge, and I understand that if any of this information is ever found to be incorrect, this application may be denied or revoked.

Parent Signature _____ Date _____

For office only:

Date received _____

Transfer Decision: ☐ Approved ☐ Not approved

Superintendent or designee _____ Date _____

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

EXHIBIT B

TRANSFER AGREEMENT

This Transfer Agreement establishes the terms and conditions for _____
_____ (“Student”) to attend school in the Highland Park Independent School
District (“District”) as a transfer student, although Student is currently a resident of the
_____ Independent School District. Student’s parent,
guardian or other person having lawful control of Student, (“Parent”) agrees to the following terms and
conditions for the transfer:

1. This Transfer Agreement is conditioned on the Student or Parent residing in the District by
_____ (the “Residency Date”). If the Student or Parent have not established
residency in the District by the Residency Date, this Transfer Agreement is null and void as if it
never existed and the Student will not be eligible to attend school in the District.
2. The Transfer Agreement is for the 20__ - 20__ school year. District approval of this transfer
creates no right or expectation that the Student will be admitted as a transfer for any subsequent
period.
3. This transfer is approved for Student only. District approval of this transfer creates no right or ex-
pectation that another student from the same family will be admitted as a transfer student.
4. Student must maintain acceptable levels of attendance and compliance with District rules and
regulations, including the Student Code of Conduct. Acceptable levels are defined as:
 - a. Attendance that does not place Student at risk of losing credit under Education Code
25.092 or require the District to warn Parent or Student of truancy proceedings under Edu-
cation Code 25.095;
 - b. Compliance with the District’s rules and regulations, including the Student Code of Conduct,
such that no offenses result in removal to a disciplinary alternative education program or
expulsion, and no more than four referrals are made within the school year for other mis-
conduct.
5. Parent agrees to pay the District tuition in the amount of \$ _____ per school day for each stu-
dent for a total of \$ _____ for ____ school days through _____, 20__. The first
payment is due on the signing of this agreement. The subsequent payments are due on the first
of each month following the date of signing this agreement.
6. The District may revoke the transfer of a student who fails meet the requirements of paragraph 4,
or whose tuition payments are delinquent pursuant to paragraph 5. Notice of revocation will be
sent to the school district where the Student resides. Any revocation will be effective immedi-
ately.
7. Parent or Student will be responsible for transportation to and from the District school to which
Student is assigned.
8. Student and parent acknowledge that eligibility of transfer students for participation in any UIL
activity or other activities voluntary following UIL rules and regulations will be determined in ac-
cordance with UIL rules and regulations.

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

9. Except as modified by this Transfer Agreement, Student is subject to all laws, policies, regulations, rights, privileges, and responsibilities of enrollment in the District as if Student resided in the District.
10. The District and Parent agree that this Transfer Agreement is the entire agreement controlling the admission and enrollment of Student in the District for the Transfer Period.

Agreed:

Parent: _____	Highland Park Independent School District
Current Address: _____	By: _____
_____	Title: _____
Date: _____	Date: _____

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

EXHIBIT C

NON-RESIDENT EMPLOYEE'S REQUEST FOR STUDENT TO TRANSFER INTO THE DISTRICT

NOTICE TO PERSON ENROLLING THE STUDENT: A person who knowingly falsifies information on a form required for a student's enrollment in the District shall be liable to the District for tuition or other costs, as provided in Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of false information. In addition, presenting false information or false records is a criminal offense under Penal Code 37.10.

Please complete this form for each student for whom a temporary transfer is being requested, attach the required documents, and submit them to the HPISD Director of Student & Administrative Services.

- ☐ This is a new request for the transfer of a student in kindergarten through grade twelve by a parent/guardian who is a full-time professional contract employee.
- ☐ This is a request for a renewal of a previously granted transfer of a full-time professional contract employee's student.

General Data

Student's legal name: First _____ Last _____

Employee's name: First _____ Last _____

Relationship: ☐ Father ☐ Mother ☐ Guardian ☐ Other: _____

Place of Employment _____ Position _____

Please provide your current address and contact information.

Address _____ City _____ State ____ Zip _____

Email _____ Home Phone _____

Father: ☐ Work ☐ Cell _____ Mother: ☐ Work ☐ Cell _____

Current school district and campus for your non-district address.

School District _____ Campus _____

Request

Transfer School Year _____ Requested start date _____ Transfer Grade Level ____

Preference of HPISD school assignment is as follows:

Prioritize elementary choices with #1 being your first choice.

____ AR ____ BO ____ BR ____ HY ____ UP
____ MIS ____ HPMS ____ HPHS

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

Eligibility

- ☐ At least one of the parents/guardians with custodial rights is a full-time professional contract employee of HPISD.
- ☐ The employee is currently a ☐ nonresident or ☐ resident of the school district.
- ☐ The child is eligible to attend school in kindergarten through grade twelve.
- ☐ The student meets disciplinary requirements **(Attach discipline history.)**

Has the student been expelled or removed to an alternative education program for one or more days in the most recent school year? ☐ Yes ☐ No

During the preceding year? ☐ Yes ☐ No

If yes to either question, for what offense(s)? _____

- ☐ The student meets attendance requirements. **(Attach attendance record.)**

How many days was the student absent in the school year prior to the year for which a transfer is requested? _____

If this request is for a transfer during a school year, how many days has the student missed in the current school year? _____

Please provide an explanation for all absences.

Services

- ☐ 504 ☐ Special Education ☐ Bilingual/ESL ☐ Dyslexia ☐ Gifted & Talented ☐ None

Participation

- ☐ Athletics ☐ Fine Arts ☐ Academic ☐ None

Acknowledgments

As a parent or person standing in the position of legal responsibility for the child named in this request, I acknowledge the following:

- ☐ I have received a copy of Highland Park ISD's policies FDA(LEGAL) and FDA(LOCAL) in addition to FDA(EXHIBIT C) which must be executed and approved before the student can enroll in the District.
- ☐ Approval is based on the criteria specified in policies FDA.
- ☐ In order to continue enrollment to the next year, as a privilege and not a right, application must be made and approved annually for each student.
- ☐ The student must follow all rules and regulations of the District.
- ☐ Eligibility for athletic or fine arts programs is not guaranteed by the approval of a transfer. Participation in UIL activities will be determined by all applicable UIL regulations and policy. [See FMF]

ADMISSIONS
INTERDISTRICT TRANSFERS

FDA
(EXHIBIT)

- ☐ Transportation to and from the transfer campus will be provided by the parent/guardian.
- ☐ After being notified of the enrollment decision in early August, I understand that I will be expected to complete the entire HPISD enrollment process, except the residency requirements, if a nonresident, for the student's first year of approval. If approved for a subsequent year, I will be expected to complete all necessary requirements of any parent, except the annual proof of residency, if a nonresident.
- ☐ I understand that I will be responsible for paying all fees related to my child's enrollment and participation in school, if my child attends school in HPISD.
- ☐ I understand that if any of this information is ever found to be incorrect, this application may be denied or revoked. In addition, falsification of documents or records is a criminal offense and subjects the person to liability for tuition or costs.
- ☐ The information provided in this form is true and factual to the best of my knowledge.

Parent Signature _____ Date _____

Parent Printed Name _____

For office only:

Date received _____

Date of committee review _____

Transfer Decision: ☐ Approved: Campus _____ Grade ____

☐ Not approved

☐ Additional information required _____

Notification:

Parent	☐ Email	☐ Phone	☐ Letter	Date _____
Campus	☐ Email	☐ Phone	☐ Letter	Date _____

Superintendent or designee _____ Date _____
