

Sample Parental Request for Transfer for a Victim of Violent Criminal Offenses**TRANSFER REQUEST FOR A VICTIM OF A VIOLENT CRIMINAL OFFENSE**

Instructions: To request a transfer for your child out of a school due to your child being a victim of a violent criminal offense please complete the following form and return it by [*date*] to the [*district office or student's school*]. You will be notified by [*date*] regarding your child's school assignment and your options if you decide to decline the school assignment at that time. The sooner you return the form, the sooner a transfer can occur.

Child's Name: _____

Parent/Guardian's Name:

School Child Currently Attends:

To decline the transfer complete this portion and return the form to the school district office.

I, _____, decline to transfer my child.
(Parent Name)

(Signature of Parent/Guardian)

(Date)

(Print Name)

To accept the transfer complete this portion and return the form to the school district office.

I select to have my child transferred. Please schedule a meeting with the appropriate School District or School Official to discuss the options available for the transfer. I can be contacted at _____.
(Telephone Number)

(Signature of Parent/Guardian)

(Date)

(Print Name)