INTER/INTRA DISTRICT TRANSFER AGREEMENT



Date Received:

Learning For All				
Transfer Requested For: Current School Year	Next School Year	\Box Inter-district \Box	New	
		\Box Intra-district \Box	Renew	
Student Name (Last, First)		Requested Grade Birth	date	
Parent/Guardian Name	Contact Number	Home Cell	Work	
Email Address	Contact Number	Home Cell	Work	
	Contact Number	Home \Box Cell \Box	W OFK	
Address	City/Zip			
Current or Last School of Attendance	Current or Last District of Attendance			
School of Residence	District of Residence			
Requested School	Requested District			
Is the student currently pending disciplinary action or under an expulsion order? \Box Yes \Box No				
What special services has the student received?				
□ Section 504 □ Special Education □ Speech □ English Language Learner If student is receiving Special Education Services, what is the current placement? □ English Language Learner				
$\Box \text{Special Day Class (SDC)} \Box \text{Resource Specialist Program (RSP)} \Box \text{Non-Public School (NPS)}$				
$\Box \text{Pending Assessment} \Box \text{Other:} \Box \text{Non-rubic School (NFS)}$				
What is/are the reason(s) for the request? (Check all that apply)				
\Box Child Care \Box Parent Employment \Box Sibling enrolled in District \Box Change of Residence \Box Specialized Program				
$\Box Continuing Enrollment \ \Box Complete Final Year at Current School \ \Box Other:$				
I understand the Inter/Intra-District Attendance Agreement is conditional upon: 1) Student obeying school rules and maintaining				
good attendance, good citizenship and passing all courses. 2) Class sizes not exceeding maximum allowed by statute or contract.				
3) Maintaining no negative balances on any accounts including but not limited to cafeteria, and library/textbook. I declare under				
penalty of perjury that the information provided above is true and accurate. I understand that the information provided is subject to				
verification and that the mere act of completing this application DOES NOT guarantee that the request will be approved. I understand				
that this agreement must be renewed annually for some school districts and transportation is the responsibility of the parent/guardian. I understand the agreement may be revoked during the year based on the terms and conditions listed above.				
parent guardiant. I understand the agreement may be revoked during the year based on the terms and conditions listed above.				
New incoming students to the Wheatland School District must sign the Agreement on the reverse side of this form.				
Parent/Guardian Signature				

RESIDENT DISTRICT	For Office Use Only	REQUESTED DISTRICT		
Approved Denied		Approved	Denied	
Superintendent/Designee		Superintendent/Designee		
Date:		Date:		