Shelton School District #309

700 S 1st St., Shelton, WA 98584
Phone (360) 426-1687 Fax (360) 427-8610

Out-of-District Student Transfer Request

***Date*_____**

The non-resident school district must accept your child before another school district can release a student. Separate forms must be completed for each student. In addition to the foregoing, all inter-district (non-resident) transfer requests must be in compliance with the above Districts' policies including but not limited to, attendance and athletic/academic standards. Request can be denied on the basis of (1) class sizes; (2) space available at grade level; (3) appropriate educational programs or service are available to improve student's condition; (4) students attendance in the district is not likely to create a risk to the health or safety of other students or staff; (5) financial hardships on receiving school district and/or other provisions defined in the above Districts' policies. Also note that requests are approved for no more than one school year. (It is the parent's responsibility to complete a new form each year.) In the event that either the application for admission to the non-resident district or the request for release from your resident district is denied, you may appeal to the Office of Superintendent of Public Instruction, Olympia, WA.

The criteria for Inter-District Transfer Request (non-resident admission), as established by the Board of Directors in each school district listed above for approval of such transfer request, is as follows: (check only one)

- ☐ There is a **financial**, **educational**, **safety**, or **health** condition affecting the student that would likely be reasonably improved as a result of the transfer.
- ☐ The student's attendance in the non-resident district makes him or her more accessible to the parent or guardian's **place of work** or to the **location of childcare**.
- ☐ There is a **special hardship** or **detrimental condition** affecting the student or the student's immediate family that would be alleviated as a result of the transfer.
- ☐ Students who **move** into the district in **mid-year** may finish the school year in their former district.
- ☐ Students in grades eleven and twelve who move into the district may complete their high school program in the former district.

It is understood that the parent/guardian must assume responsibility for adequate transportation to and from school.

(Please Print)

Student's Name: _____ Grade Level for Requested Year: _____ Age: _____

Street Address: _____ City/State/Zip _____

Mailing Address if different: _____ City/State/Zip _____

Signature of Parent/Guardian: _____ Home Phone: _____

Printed Name of Parent/Guardian: _____ Work Phone: _____

Resident School District: _____ Resident School: _____

Last School Attended: _____ Date Attended: _____

Request Transfer to (District): _____ Request Transfer to (School): _____

☐ New Request ☐ Renewal Request School Year Requested: _____ Number of Months: _____

☐ Yes ☐ No Is your child currently under an expulsion or suspension from another school district?

☐ Yes ☐ No Is there another child in the family requesting transfer? Name(s) _____
Each child will need a completed form.

☐ Yes ☐ No Is the student enrolled in any special education programs? _____ _____
Special Education Director Date

☐ **APPROVAL OF REQUEST**: Requested transfer DOES meet district criteria (checked above) and is granted for the requested school year. If, at any time during the period of the transfer, the object of the transfer is either substantially achieved or is determined to be unobtainable, this transfer agreement may be terminated.

_____ _____ _____ _____
Resident School District Official & District **Date** **Non-Resident School District Official & District** **Date**

☐ **DENIAL OF REQUEST**: Requested transfer DOES NOT meet district criteria (checked above) for this reason_____

_____

_____ _____ _____ _____
Resident School District Official & District **Date** **Non-Resident School District Official & District** **Date**

PLEASE SEND COMPLETED AND APPROVED COPY TO APPROPRIATE SCHOOL DISTRICT