## **Student Intra Dist Transfers App Form**



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RECEIVING SITE (TRANSFER TO)			SCHOOL YEAR
COUNTY NAME			
DISTRICT NAME			
SITE REQUESTED** SENDING SITE			
SITE LEAVING NAME			
STUDENT INFORMATION			
FIRST NAME			
MIDDLE NAME			
LAST NAME			
BIRTH DATE (MM/DD/YYYY) / GRADE LEVEL	ETHNICITY	/	GENDER
10-DIGIT STATE ID STATE TESTING NUMBER (STN) OF Check here if the student is currently enrolled in Homesch			
from another state or country, or the student has never at	tended a public sch	ool in the State o	f Oklahoma.
Is this student being served on an Individual Education Pr	rogram (IEP)?		
Yes No	DATE OF IEP MEETING		
<b>Receiving Site:</b> If above answer is "yes," a representative from bostudent's IEP needs. Applicable records must be submitted from the maintained by both sites in accordance with federal and state law	ne student's last schoo		

**Sending Site:** A request for education records of a student who was enrolled in the district shall be fulfilled within three business days of the request. The records should include the student's disciplinary records and attendance information.

**Please Note:** An "IEP Service Agreement" does not constitute a transfer under the Education Open Transfer Act and should not be formalized by using this form.

\*\*This question is to assist the receiving school in referencing capacity at the site that would be your preference. This is not a guarantee that capacity is available there.

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PARENT/LEGAL	<b>GUARDIAN</b>	MUST	COMPLETE	AND	SIGN

FIRST AND LAST N	NAME	EMAIL
STREET ADDRESS		
CITY		ZIP CODE
HOME PHONE		ALTERNATIVE PHONE
Does the student les [] No [] s. Is the student a c les [] No [] s. Did the student ch	have siblings that are already er	he prior school year? Yes [] No [] nrolled and attending the desired school site?  that works at the desired school site?  ct and wish to continue attending the same []
application is hereby madindicated on this form. The of the child listed above a School Attendance Laws parent or guardian of the Transfer Act 70 O.S. § 8-3 discipline as outlined in 70 unexcused absences in on of the student this transfer	de to permit the child listed on this form to be parent/guardian applicant verifies by the und hereby acknowledges that if this trans of Oklahoma rules and all regulations of the minor student named above, I acknowled 101.2 the Receiving District may deny the 100.S. § 24-101.3; and/or as a result of the semester. 700.S. § 8-101(A-B). As such	a, and the rules and regulations of the State Board of Education, this transfer from their resident Sending District to the Receiving District as eir signature (below) that they are the custodial parent or legal guardian fer is approved, the parent/guardian shall be bound by the Compulsory ne Receiving District named on this transfer application. Further, as the dge, agree, understand that pursuant to the Oklahoma Education Open request for transfer based on a lack of capacity, an incident of student estudent have a history of absences, which is defined as ten or more, I hereby authorize the Receiving District to access the education records rovided, however, the authorization to access the education records is pline and attendance data.
	IE PARENT/GUARDIAN	DATE
	usiness days to upload this trans	fer request into the transfer system. If there is etain this information to upload into the transfer system.
Received by		District
DISTR	ICT EMPLOYEE RECEIVING	NAME OF DISTRICT
at	ON DATE	Approved Denied