

Application for Transfer
FY 2011-2012

Tuition Required Yes No

Cash/Amount _____

Check #/Amount _____

Authority for Data Collection: Civil Action 5281, Section A

Planned Use of Data: Administration of the transfer laws, rules and regulations.

Instructions: All requested information must be completed in order to process transfers for students within the State of Texas. The Superintendent of the receiving district must check approved or disapproved and sign the transfer form.

Student's Name			Sex	Date of Birth Mo/Day/Yr	Student's SSN	Transfer Last Year? (Continuing)		Ethnic Code	Sending Co/District Campus Number	E/H Code	Grade 2011-12	Receiving Campus No.
Last	First	MI				Yes	No					

THIS SECTION MUST BE COMPLETED BY PARENT OR GUARDIAN

I have been informed of the receiving district's policy concerning tuition charges for a transferred student whose grade is taught in the student's district of residence; and I accept responsibility for the payment of tuition.

Parent/Guardian Signature _____ Parent/Guardian **Printed** Name _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ Phone Numbers _____

To ensure that transfer fees are assessed correctly, please list all students in this household wishing to transfer into this District: (\$900 for 1st student and \$300 for each additional)

1) _____ **Grade** _____ 2) _____ **Grade** _____

3) _____ **Grade** _____ 4) _____ **Grade** _____

THIS SECTION MUST BE COMPLETED BY THE RECEIVING DISTRICT PRINCIPAL _____

Principal's Signature

The above transfer was approved disapproved on this _____ day of _____, 20____.

List reason for disapproval: _____

THIS SECTION MUST BE COMPLETED BY THE RECEIVING DISTRICT SUPERINTENDENT

The above transfer was approved disapproved on this _____ day of _____, 20____.

Name of Receiving District Superintendent _____ Signature _____

Joyce W. Sloan _____

