FREMONT COUNTY SCHOOL DISTRICT JOINT AGREEMENT
PARENT'S APPLICATION FOR TRANSFER OF PUPILS

Date of Application _____ **For the School Year** _____

INSTRUCTIONS: Please complete items 1, 2 , 3 and 4. Please take this form to the school you are transferring from and have the principal complete items 5, 6, 7, 8, 9 and 10. When items 1-11 have been completed, take this form to the sending school Superintendent for an approval or denial of this request. If the sending school district approves the request, take this form to the school you wish to enroll in.

1. Student Name _____ DOB _____ Grade _____

   Name of School Applying to Attend: _____

2. Reason for Transfer: _____

3. Has any child in this family been transferred to this district before? Yes ____ No ___ If yes, what year? _____

4. Name and Address of School Child has been attending: _____

This application verifies that he/she is the parent or guardian of the above named. This applicant hereby acknowledges that he/she and the child, if transferred, shall be bound by the rules and regulations of the receiving district and the compulsory attendance laws of Wyoming. The applicant hereby grants permission for the proposed receiving District to receive the child's school records including transcripts/grades, attendance, discipline, testing, and special education.

_____ _____ _____

Signature of Parent or Guardian | Residence Telephone | Business Telephone

_____ _____ _____

Physical Address | City | Zip Code

_____ _____ _____

Mailing Address | City | Zip Code

_____If you are applying to the same school district in which your child attended school last year, check this box and do not complete the rest of the form. Marking this statement will serve as a reapplication to the non-resident district. There is no guarantee that admission to the district to which you are reapplying will be approved. If admission is approved, it is for the period of one year.

Administrative Information completed by the Principal or Assistant Principal of school <u>currently attending.</u>

5 Last Date of Attendance _____

6. Number or absences this past semester or this semester _____

7. Has this student been dropped from your school due to attendance or discipline issues ____Yes ____No

   If yes, please explain and list date(s)_____

8. Is this student leaving your school pending disciplinary action? _____Yes _____No

   If yes, please explain_____

9. Does this student have a disciplinary record? _____Yes _____ No

   If yes, Please explain and list date(s):_____

   _____

10. Is this student receiving any special education services? Yes_____No _____

    If yes, include the most recent IEP.

11. Is this student identified as an ELL student? _____Yes _____No

_____ _____ _____

Administrative Signature | Title or Position | Date

<u>School District of Residence</u> (School District you LIVE in)

Fremont County School District # _____

___Approved ___Denied

Signature of School Superintendent _____ Date _____

School District Currently Attending (School District Child is currently Attending)
Fremont County School District# _____
___Approved___Denied

Signature of School Superintendent _____ Date _____

Receiving School District (School and District your child is applying TO attend)
Fremont County School District No. ____
___Approved ___Denied

Conditions of Enrollment _____

Signature of Receiving School Administrator _____ Date _____

Please include with this form an unofficial transcript, current grades and special education records for scheduling purposes.