

PUYALLUP SCHOOL DISTRICT 2019-2020
HIGH SCHOOL REQUEST FOR INTRA-DISTRICT TRANSFER OF SCHOOLS WITHIN THE SCHOOL DISTRICT

<p>Please return application to: Puyallup School District Attention: Stacie Estrada 302 – 2nd St SE Puyallup, WA 98372</p>	<ul style="list-style-type: none"> ♦ Due Date: Submission window is December 10 - January 10 for optimal placement. ♦ If the request is received after January 10, the next timelines for review are April 10 and June 1. Requests received after June 1 may not be reviewed until after 4th day counts in September. ♦ Please complete form and return to the district office, not the school.
--	--

Student Name _____	Requested School Year _____ Grade _____
Birth Date ____ / ____ / ____ Student ID # _____	Semester: First <input type="checkbox"/> Second <input type="checkbox"/>
Parent/Guardian Name _____	Resident School _____
Parent E-mail Address _____	Requested School _____
Physical Address _____	Name of School Currently Attending _____
City, Zip _____	Puyallup School District Employee No <input type="checkbox"/> Yes <input type="checkbox"/> Location: _____
Phone _____	Sibling currently on a waiver? No <input type="checkbox"/> Yes <input type="checkbox"/> Which School: _____
<input type="checkbox"/> Please check box if this is a NEW ADDRESS	Sibling's Name: _____ FIRST LAST
	Is there a current discipline infraction? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Any special education assistance? *Yes <input type="checkbox"/> No <input type="checkbox"/>
	*NEW Students - Please provide copy of IEP.
	Participation in high school athletics? Yes <input type="checkbox"/> No <input type="checkbox"/>

Puyallup School District Board Policy No. 3131 states "Transfers may be granted ...if:

- A. A financial, educational safety, or health condition affecting the student would be reasonably improved as a result of the transfer;
- B. Attendance at another school in the District is more accessible to the parent's place of work or to the location of childcare; or
- C. There is some other special hardship or detrimental condition affecting the student or the student's immediate family which would be alleviated as a result of the transfer.
- D. A student who moves to a new attendance area in the District during the school year may elect to transfer at the time of the move or at the end of the semester or grading period. For a high school sophomore or junior, transfers may only be approved to coincide with the beginning of a new grading period. A senior may elect to finish the school year without transferring to a new school, but must declare his or her preference prior to the beginning of the last semester."

<u>Please check one:</u>	Financial <input type="checkbox"/>	Accessibility <input type="checkbox"/>	
	Health Condition <input type="checkbox"/>	Special Hardship <input type="checkbox"/>	
	Educational Safety <input type="checkbox"/>	Magnet Program <input type="checkbox"/>	_____

Magnet Program Name _____

I understand that if this request is approved, transportation is the parent's responsibility, and that my student will be held to high standards of academic progress, behavior, and attendance in order to maintain the transfer.

I understand that if this request is approved, my student will not need to apply again as long as he/she attends this building. However, I may rescind the transfer at my discretion.

I understand that if I choose to rescind this transfer, I will do so in writing and submit to the building currently enrolled.

Signature of Parent/Guardian _____ Date ____ / ____ / ____

FOR OFFICE USE ONLY

_____ School District Official Signature	_____ Date	_____ Accepted	_____ School	_____ Denied
---	---------------	-------------------	-----------------	-----------------

Denied for transfer due to: _____

Puyallup School District does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. Questions and complaints of alleged discrimination may be directed to Human Resources, Amie Brandmire ~ (253) 841-8666; Equity and Achievement, Gerald Denman ~ (253) 840-8966; Title IX Coordinator, Jim Meyerhoff ~ (253) 841-8785; or Section 504 Coordinator, Gerald Denman ~ (253) 840-8966