DONNA INDEPENDENT SCHOOL DISTRICT CAMPUS TRANSFER REQUEST (Includes all current 5 th and 8 th grade students and any student requesting to transfer to a different campus) 2020-2021 Timeline to submit: March 9 – May 8, 2020					
Please Check All That Apply: Image: Second state Image: Second state					
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All transfer request forms need to be submitted to the Intake/Student Engagement Department Office					
All students requesting an in-district transfer must complete a transfer request form every year. A separate transfer request form must be completed for each child requesting a transfer within the district.					
Child's full legal name (First, Middle, Last and Suffix (if a Note: Texas Law requires school systems to us legally changed in court, please ensure the nam	ise the name on the child's				
Name of Student:		ID#			
D.O.B.: Grade L					
Physical Address:					
Mailing Address:					
Name of parent or legal guardian:					
Phone number(s):					
□ I confirm the above address represents the legal resi understand that parents or guardians who use a fraudul restitution to the school district or other costs or fees u	sidence of this child's paren ilent address for enrollmen	nt or legal guardian. I			
Home Campus Name: Re	equested Campus Name:				
Is student an Athlete Yes No; Is student a Cheerl Comments:					
Is student a Dancer	□YES □NO				
Students allowed to transfer shall be subject to UIL eligibility r responsibility of the student/parent to determine the effect o be reviewed with campus administration, athletics or fine arts	of his or her transfer on UIL eli	igibility status. This rule should	_		
Transfers will be based on the following criteria:					
☐ Is Parent/ <u>Legal</u> Guardian employed with Donna ISE	D? □ YES □ NO <i>If y</i>	es, then complete information be	elow:		
Name of Parent/Legal Guardian:					
Campus/Department employed at:					
FDB (EXHIBIT-A)					

□ Other (please specify reason for transfer request): _____

Student transfers will be decided on a case-by-case basis; only legitimate parent requests will be considered. It will be the parent/guardian's responsibility to provide transportation for the students if a campus transfer is honored.

NOTE: Any inaccurate contact information at the time of processing may result in the inability to process your request.

 \Box I have read and agreed on the above terms and conditions. I understand that if approved, the transfer is granted conditionally on student attendance including tardies, behavior, academic effort and that the transfer may be revoked. (*Policy FDB – Local*) I understand that transportation to the requested school is my responsibility.

Signature of parent or legal guardian:		Date:	
STEP 1: CURRENT CAMPUS APPR		• •	
CURRENT Campus Principal Signature Date:			
STEP 2: REQUESTED CAMPUS APPRC Principal's Comments:			
REQUESTED Campus Principal Signatu Date:			
STEP 3: FINAL APPROVAL	Form Submitted to Central Office:	Date:	
Superintendent's or Designee's Signation Date:			
STEP 4: DATA ENTRY	Transferred entered into TEAMS:	Date:	