

2018 – 2019

MCDADE INDEPENDENT SCHOOL DISTRICT STUDENT TRANSFER REQUEST FORM

STUDENT INFORMATION

Student's Name _____ Transfer requested for ____ Grade Level
Current Grade Level _____ Student's Gender: M F Date of Birth _____
Parent/Guardian's Name _____ Email Address _____
Physical Address _____ City _____ Zip _____
Mailing Address _____ Phone # _____

Resident School District _____ Resident Campus _____
(Resident school district is the district in which you live i.e. Name ISD) (Resident campus is the campus in which you live i.e. Elementary)

Reason for request

- 1. Open Enrollment
2. MCDADE ISD Employee
3. Moving out of district, wish to remain in McDade ISD for the rest of the current school year.
4. Building/Buying a residence in McDade ISD, estimated move in date _____ (attach contract)
Campus and District of last school attended _____

Required Documents (must be attached with application)

- 1. Most recent report card
2. Test Scores (STAAR, Assessment – grades 4-12)
3. Transcripts (grades 8-12)
4. Documentation of Satisfactory attendance and Discipline records (grades K-12)

Special Services being provided

- None ESL Other (specify)
Career & Technology
504 Speech
Special Education (attach IEP)

Siblings (Please list siblings, grade and campus they attend)

If you would like to include additional information please attach a separate letter of explanation to this form.

Signatures

I understand that my child must follow all McDade ISD rules, policies, and academic requirements and that this transfer agreement may be revoked for failure to follow these rules, policies, and requirements. By signing this form I agree that I am responsible to see that my child will follow all school rules, policies, and academic requirements or my child's transfer will be revoked. I also understand that as a parent/guardian I pledge to support, cooperate and remain positive of the educational process while my child is at McDade ISD. I understand that transportation to the requested school is my responsibility. I further understand that falsification of information is a Class A Misdemeanor and can lead to legal action.

My Child will: (initial each)

- Maintain attendance as required by TEA
Arrive on time each day for school and have no more than 3 early pick ups
Maintain passing grades
Pass grade level state assessment
Maintain proper discipline
Parents/Guardians promise to remain supportive, positive, and cooperative of the educational process

Parent/Guardian Signature _____ Date _____

Please submit the transfer request form to McDade ISD Central Administration

McDade ISD use only

Superintendent _____
Date Parent/Guardian Notified _____

Out of District County District # _____
Approved Denied (reason) _____
Letter Phone By Whom (Initial)