

APPLICATION FOR TRANSFER TO A NON-RESIDENT ATKINS DISTRICT
“ARKANSAS PUBLIC SCHOOL CHOICE ACT OF 2015
(Must be Submitted to Non-Resident District)

APPLICANT INFORMATION			
Student Name:			
Student Date of Birth:	Gender:	Male	Female
GRADE:			
Does the applicant require special needs or programs?	Yes	No	
Is applicant currently under expulsion?	Yes	No	
ETHNIC ORIGIN (CHECK ONE)			
2 or More Races	White	Native American	Native Hawaiian
Hispanic	Asian	African American	
RESIDENT SCHOOL DISTRICT OF APPLICANT			
District Name		County Name	
Address			
Phone			
NON-RESIDENT SCHOOL DISTRICT APPLICANT WISHES TO ATTEND			
District Name	Atkins Public Schools	County Name	Pope
Address	307 North Church Street	Atkins	AR 72823
Phone	479-641-7871		
Does the applicant already have a sibling or step-sibling in attendance in this Atkins Public School district pursuant to the Public School, Public School Choice Act of 2015?			
PARENT OR GUARDIAN INFORMATION OF APPLICANT			
Name:		Home Phone:	
Address:		Work Phone:	
Parent/Guardian Signature			Date
<p>Pursuant to standards adopted by a non-resident school board a non-resident district may reserve the right to accept and reject applicants based on capacity of programs, class, grade level, or school building. Likewise, a non-resident district’s standards may provide for the rejection of an applicant based upon the submission of false or misleading information to the above listed request for information when that information directly impacts the legal qualifications of an applicant to transfer pursuant to the School Choice Act. However, a non-resident district’s standards shall not include an applicant’s previous academic achievement, athletic or other extracurricular ability, handicapping conditions, English proficiency level, or previous disciplinary proceedings, except that an expulsion from another district may be included pursuant to Ark. Code Ann. §6-18-510. Priority will be given to applicants with siblings attending the district. The non-resident district shall accept credits toward graduation that were awarded by another district and award a diploma to a non-resident applicant if the applicant meets the non-resident district’s graduation requirements. This application must be filed in the non-resident district or postmarked no later than May 1 of the year in which the applicant would begin the fall semester at the non-resident district. A student whose application for transfer is rejected by the nonresident district may request a hearing before the State Board of Education to reconsider the transfer by filing such a request in writing with the commissioner of Education no later than ten (10) days after the student or student’s parent receives a notice of rejection (Consult Ark. Code Ann. . §6-18-1905 and the Arkansas Department of Education Rules Governing the Public School Choice Ace of 2015 for specific procedures on how to file such an appeal.</p>			
DISTRICT USE ONLY			
Date and Time Received by Resident District:		Date and Time Received by Non-Resident District:	
Resident District LEA #		Non-Resident LEA #	
Student’s State Identification # :			
Application Accepted <input type="checkbox"/> Rejected <input type="checkbox"/>			
Reason for Rejection (If Applicable):			
Date Notification Sent to Parent/Guardian of Applicant:			
Date Notification Sent to Resident District:			