

**Authority for Data Collection:** Texas Education Code 21.061: Section A  
**Planned Use of Data:** To complete the report required by Federal Court Order Civil Action 5281.  
**Instructions:** This form must be used for all student transfers, within the State of Texas, including hardship. Column instructions can be found on the reverse side of this form. The Superintendent of the receiving district must circle approved or disapproved and sign the transfer form. For further information contact the Division of Equal Education Opportunity at (512)463-9671.

Student Social Security # \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_,  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

LIST ALL STUDENTS WHO WILL ATTEND ALL CAMPUSES

Student's Name	Ethnic Code	Current Attendance Data Student's Residence		District Student Attended Prior Year Co/Dist #	Grade	Receiving Campus
		Co/Dist#	Campus #			

Reason for transferring: \_\_\_\_\_  
 \_\_\_\_\_

This section must be completed by parent or guardian:  
 I have been informed of the receiving district's policy concerning tuition charges. If any, for a transferred student whose grade is taught in the student's district; and I accept responsibility for the payment of tuition.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_

This section must be completed by the receiving district superintendent:  
 The above transfer(s) was  approved on this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
 disapproved

Typed Name of Receiving District Superintendent	Date	Telephone #	Signature
Michelle Barrow		409-420-6600	