

# Andover School District Student Transfer Request



Dear Transfer Applicant:

Please read and sign this form prior to sending in the transfer request. Transfers are based on the following stipulations:

1. All high school students who transfer from one school to another shall be subject to all eligibility rules of the Kansas State High Activities Association (KSHSAA) and the Andover Board of Education. Questions should be addressed to the sending school's administration.
2. Students' schedules may vary depending on class availability at the new school they attend.
3. Bus service will not be provided to students attending a school outside their designated attendance area.
4. Requests for transfer for all students must be submitted annually. It should be noted that approval one year is not a guarantee for future approvals. Students moving from the 5th to the 6th grade, or from the 8th to the 9th grade are expected to enroll in the secondary school designated for the attendance area in which the student resides.
5. An approval of transfer for a student does not automatically apply to siblings. Siblings need to apply separately for transfers and will be subject to the same stipulations as all other transfers.
6. The parent will be responsible for requesting a refund of enrollment fees.
7. Transfer applications, approvals or denials will be communicated via letter.
8. All requests for the upcoming school year are due before May 1 for priority consideration.
9. All requests received after May 1 will be reviewed in August after the August enrollment period ends.
10. Complete sections A and B of this document and forward this form to the sending school principal of the current attendance center.
11. The Andover School District reserves the right to suspend or revoke a transfer approval at any time for student truancy and/or student misconduct.

**I have read and understood the above stipulations and procedures for applying for a school transfer.**

\_\_\_\_\_

*Printed Parent/Guardian Name*

\_\_\_\_\_

*Parent/Guardian Signature*

\_\_\_\_\_

*Date*

Original request forms must be submitted to the current attendance center. No faxes are accepted.

## SECTION A—Reason for Transfer

(If applying as an employee, please include your position and location)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this a reapplication from prior year?  Yes  No

## SECTION B—Student Data

Male  Female

Date \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name MI Date of Birth Telephone E-mail Address

\_\_\_\_\_  
Current Grade Anticipated Grade 2019-2020 Address City State ZIP

Babysitter's Address (if applicable) \_\_\_\_\_

School currently assigned to: \_\_\_\_\_ Requesting transfer to: \_\_\_\_\_

1. Is this a new transfer? \_\_\_\_\_ Yes \_\_\_\_\_ No

This student is currently involved in:

- Special Education Programs
- Athletics (specify) \_\_\_\_\_
- Vocal/Instrumental Music
- Forensics/Debate
- Other \_\_\_\_\_

This student is planning to be involved in:

- Special Education Programs
- Athletics (specify) \_\_\_\_\_
- Vocal/Instrumental Music
- Forensics/Debate
- Other \_\_\_\_\_

2. Was the student enrolled in Andover Schools last semester? \_\_\_\_\_ Yes \_\_\_\_\_ No
3. Is this transfer for a high school student? \_\_\_\_\_ Yes \_\_\_\_\_ No
4. Does the student have an active IEP or a 504 Plan? \_\_\_\_\_ Yes \_\_\_\_\_ No
5. Is the student currently living with parents? \_\_\_\_\_ Yes \_\_\_\_\_ No
6. Is the student currently living with a court appointed guardian? \_\_\_\_\_ Yes \_\_\_\_\_ No

When **Section A** (on reverse) and **B** have been completed, submit this form to your child's current attendance center principal. The School District will complete **Sections C and D** and forward a written decision concerning this transfer to you.

## SECTION C—Sending School Administrator's Comments

Comments \_\_\_\_\_

Assignment Granted  Yes  No

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

Eligibility for KHSAA Activities  Yes  No

## SECTION D—Receiving School Administrator's Comments

Comments \_\_\_\_\_

Assignment Granted  Yes  No

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

## DISPOSITION—District Office Use Only

Comments \_\_\_\_\_

Assignment Granted  Yes  No

\_\_\_\_\_  
District Office Administrator Signature

\_\_\_\_\_  
Date