

ADMISSIONS
INTRADISTRICT TRANSFERS AND CLASSROOM ASSIGNMENTS

FDB
(EXHIBIT)

The District will use the forms on the following pages in conjunction with intradistrict transfers:

- Exhibit A: Application for Carl S. Wunsche, Sr., High School (CWSHS) Intradistrict Transfer — 2 pages
- Exhibit B: Application for Intradistrict Transfer for all other campuses — 2 pages
- Exhibit C: Certification of Childcare Arrangements — 2 pages
- Exhibit D: Application for Intradistrict Transfer Public Education Grant (PEG) List Campuses — 2 pages

EXHIBIT A

APPLICATION FOR INTRADISTRICT TRANSFER
FOR STUDENTS ENROLLED AT CARL S. WUNSCH, SR., HIGH SCHOOL

Name of Student: _____

Current Grade: _____

Street Address: _____

City / Zip: _____

Name of Parent(s)/Guardian(s): _____

Home Telephone: _____

Work Telephone: _____

Cell Telephone: _____

Request Transfer to (Circle Home Campus): DHS SHS WHS

Date of Request: _____

Reason for Transfer: _____

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I understand that, in accordance with Penal Code § 37.10, providing false information on a government document may result in criminal charges being filed.

Parent/Guardian Signature

Parent/Guardian Signature

Date

Date

Note: Transportation will be furnished only within the attendance zone of the "home" school. Transfers will not be approved that adversely affect the sending or receiving school.

For Office Use Only

CWSHS Principal Signature

Receiving Campus Principal Signature

Date

Date

EXHIBIT B

APPLICATION FOR INTRADISTRICT TRANSFER

Name of Student: _____

Current Grade: _____

Street Address: _____

City / Zip: _____

Name of Parent(s)/Guardian(s): _____

Home Telephone: _____

Work Telephone: _____

Cell Telephone: _____

Campus Assigned: _____

Request Transfer to: _____

Date Transfer to be Effective: _____

Date of Request: _____

Reason for Transfer: _____

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Have you applied for a previous transfer this school year? (check one) Yes No

If Yes, please explain: _____

I understand that, in accordance with Penal Code § 37.10, providing false information on a government document may result in criminal charges being filed.

Parent/Guardian Signature

Parent/Guardian Signature

Date

Date

Receiving Principal Signature

Date

Sending Principal Signature

Date

Central Office: Approved Denied for the _____ school year only.

Central Office Administrator Signature

Date

Note: Transportation will be furnished only within the attendance zone of the receiving school. Transfers will not be approved that adversely affect the sending or receiving school. Application for transfers must be submitted each school year.

EXHIBIT C

CERTIFICATION OF CHILDCARE ARRANGEMENTS*

(PLEASE PRINT INFORMATION)

Student's Name: _____

Current Grade: _____

Street Address: _____

City / Zip: _____

Home Telephone: _____

Work Telephone: _____

Cell Telephone: _____

Name of School to which Student Assigned: _____

Name of Childcare Provider: _____

Street Address: _____

City / Zip: _____

Telephone: _____

*NOTARY REQUIRED

I am the childcare provider for the student named below. I have made arrangements with the parent/guardian to keep this child before and/or after school at my residence/facility. I understand that, in accordance with Penal Code § 37.10, providing false information on a government document may result in criminal charges being filed.

Printed Name of Childcare Provider: _____

Signature of Childcare Provider: _____

Date: _____

The State of Texas

County of _____

BEFORE ME, a notary public, on this day personally appeared _____
_____, known to me to be the person whose name
is subscribed to the foregoing document, and being by me first duly sworn, declared that the
statements therein contained are true and correct.

SWORN TO BE SUBSCRIBED before me this _____ day of _____, 200____

Notary Public Signature: _____

Printed Name of Notary: _____

Commission Expires: _____

EXHIBIT D

APPLICATION FOR INTRADISTRICT TRANSFER
PUBLIC EDUCATION GRANT (PEG) LIST CAMPUSES

Name of Student _____ Grade _____ Student ID# _____

Address _____
Street City Zip

Name(s) of Parent/Guardian: _____

Telephone: Home _____ Cell _____ Work _____

PEG LIST Campus _____

Request Transfer To: 1st Choice: _____ 2nd Choice: _____

Date of Request: _____

Reason for Transfer: _____

I understand that, in accordance with Section § 37.10 of the Penal Code, providing false information on a governmental document may result in criminal charges being filed.

Parent/Guardian Signature

Parent/Guardian Signature

Area Superintendent Signature

Date

_____ **Approved** _____ **Denied** (Area Superintendent initial one) for the _____ school year only

Date Transfer to be Effective: _____

Sending Principal/Date

Receiving Principal/Date

TERMS:

- District transportation is not provided.
- Transfers are subject to all requirements set forth in policies FDB(LEGAL) and FDB(LOCAL).
- Transfers will be on a first-come, first-served system and may be denied due to lack of instructional space at the campus.
- Transfers will not be approved for athletic purposes.
- Athletes: After transferring, if you elect to transfer to another school, you will be ineligible at the school to which you transfer for all varsity athletics for at least one calendar year.
- PEG list transfers related to a campus on the PEG list are not allowed to begin until the designated school year begins.
- Student eligibility will expire upon the following:
 - a. Completion of all grades on the PEG list campus upon which eligibility was originally based;
 - b. Removal of the campus from the PEG list; or
 - c. Assignment of the student to a campus that is not on the PEG list as a result of re-drawn attendance boundaries or the student moves into a different attendance area.