



DORCHESTER SCHOOL DISTRICT TWO IN-DISTRICT TRANSFER REQUEST

In-District Request Period **May 15th – June 30th**

No request will be accepted prior to May 15 or after June 30th

All requested information should be submitted to the student's school of residence.

STUDENT INFORMATION

___ **Initial Request** ___ **Repeat Request**

Last Name _____ First Name _____ Middle Name _____
School of Residence _____ Requested School _____
Current Grade Level _____ Date of Birth _____ Age _____

PARENT/GUARDIAN INFORMATION

(Please Circle) Mother Step-Mother Father Step-Father Legal Guardian

Last Name _____ First Name _____
Home Address _____
Home Phone _____Street Work Phone _____City Cell Phone _____State _____Zip Code

SPECIAL INFORMATION

Student has been referred for testing () Yes () No School: _____
Student has a current IEP () Yes () No Classification: _____
Student is on a 504 Plan () Yes () No
Student is currently enrolled in a Gifted and Talented Program () Yes () No

BASIS FOR THIS REQUEST

Briefly state your reason(s) for the request (you may use the back of this form if you need additional space).

My signature below indicates that I understand that if the transfer is approved, the following are applicable:

- I will assume ALL responsibility for transporting my child to and from school **on time**.
- Transfer requests for the purpose of participation in athletics will not be granted.
- My child **may be ineligible** to participate in athletics for a period of 365 days from the date of transfer (SC High School League regulations apply).
- Should my child withdraw from the program of study for which the transfer was approved, he/she will be required to return to the school he/she is zoned to attend.
- This request is for the above-named child **only** and does not include approval priority for siblings.
- Approved transfers are granted for one (1) school year only. Re-application must be made during the application period (May 15th – June 30th) each year. Continued approval is not guaranteed.
- A student's transfer may be revoked by the superintendent's designee for reasons including, but not limited to, repeated tardies and/or other irregularities of attendance, and/or repeated consequential violations of the discipline code.
- Submission of false information will be grounds for denial of this application or revocation of an approved transfer.

Signature of Parent/Legal Guardian

Relationship to Student

Date

FOR OFFICE USE ONLY

School of Residence:

Elementary _____
Middle _____
High _____

School Requested:

Elementary _____
Middle _____
High _____

Request Granted Request Denied

Special Notes

Authorized Signature (Administrator)

Date: _____