



OPEN ENROLLMENT / IN-DISTRICT TRANSFER REQUEST
For Snoqualmie Valley School District Resident Students

REQUEST FOR _____ SCHOOL YEAR

CHECK ONE: ELEMENTARY SCHOOL
MIDDLE SCHOOL
HIGH SCHOOL

Directions: Complete this form and submit to the SVSD district office. When you receive an approved copy from the district, you may enroll at accepting school.

STUDENT LAST NAME FIRST NAME ASSIGNED SCHOOL
STREET APT# DATE OF BIRTH GRADE LEVEL OF TRANSFER YEAR GENDER
CITY STATE WA ZIP

Mailing Address (if different than street address)

ADDRESS OR PO BOX CITY STATE WA ZIP

PARENT EMAIL ADDRESS CURRENT SCHOOL
PHONE 1: HOME CELL WORK PHONE 2: HOME CELL WORK
IF THIS IS A NEW ADDRESS PLEASE INDICATE THE MOVE-IN DATE (PROOF OF RESIDENCY WILL BE REQUIRED)

Transfer is requested from _____ School to _____ School.
ASSIGNED REQUESTED

Reason for Request:
(Check all that apply)

- Financial Safety Health Hardship
Location of childcare or parent's workplace Sibling at same school
Complete school level (elementary, middle, high school) Complete current school year

Explain your reasons for this transfer request:

Identify any special services or educational programs that your student participated in at his/her current school:

Special Education OT/PT ELL/ESL 504 Plan SLP Gifted Programs Other

If this transfer is approved, I understand the following:

- Transportation is the responsibility of the parent/guardian.
Approved transfers may be discontinued for the following reasons:
a) If adequate space is no longer available at the proper grade level because of an increase in enrollment including increases resulting from attendance-area boundary changes.
b) If the student is excessively tardy or truant, or engages in frequent misconduct, and/or disruptive behavior in violation of school/program rules that indicate the student is not being successful in the school or program.
Transfer requests are for one year only and must be renewed annually.

PLEASE PRINT PARENT/GUARDIAN NAME SIGNATURE (PARENT/GUARDIAN) DATE

FOR OFFICE USE ONLY
APPROVED DENIED
APPROVED with the following conditions:
EFFECTIVE ENROLLMENT DATE ACCEPTING SCHOOL SIGNATURE OF ADMINISTRATOR DATE
Copies To:
PARENT ACCEPTING SCHOOL RELEASING SCHOOL TRANSPORTATION STUDENT PLACEMENT
REVISED: 1/2018