		4404		ANNUAL Transfer Reque					
	LE SCHOOL D	151 KIUI #		ON-RES			IN-DISTRICT TRANSFER Form 3131F		
Directions: Please PRIN transcript for grades 9-1:	IT, using blue or b 2 (most recent repo	ort card for gr	rades 1-8).	. Turn in do	ocumei plete S	nts wit Section I	h this form. I. Return complete	record & current un ed form to the district ear: 20 to 20_	office.
SECTION I	APPROVAL IS FOR	R <u>ONE</u> SCHOOL YEAR <u>ONLY</u> .					Today's Da	ıte:	
	Student Inform	nation					New Request	Renewal	
Student Name:	Last	F	First			M.I.	Birth Date: Age:		
Parent/Guardian Name:						101.11.	Grade Level:		
Residence Address:	Last (Print Please)		First			М.І.	Parent Email:		
	Street Address							Apartment/Unit #	
	City					State		ZIP Code	
Mailing Address: (If different from above)								Apartment/Unit #	
-	City					State		ZIP Code	
Cell/Home Phone:	,			Work	Phone				İ
				<u> </u>					
Check only <u>ONE</u> bo	x in each cate								
Neighborhood Schoo		Current Sc					Requested Sc		
				atonville Elen			Oslumbia	Eatonville Elementar	
Columbia Crest A-S Weverbaeu	iser Elementary	Col	Columbia Crest A-STEM A					Crest A-STEM Academ eyerhaeuser Elementar	
•	e Middle School		Weyerhaeuser Elen					Eatonville Middle Schoo	•
	ille High School		Eatonville Middle S Eatonville High S					Eatonville High Schoo	
**NON-Resident D		Mt. R	Mt. Rainier Parent Partnership				Mt. Rainier P	arent Partnership (K-5th	
District:			Eatonville Online Academy (6					nline Academy (6th-12th	
School:	Elementary Virtual Academy						v Virtual Academy (K-5th	,	
Reason(s) for the r									
Currently enrolled	at requested scho	ol Name	of school:	:					
Requested school									
Financial, Education	•								
There is some other	r special hardship c	r detrimental	l condition	affecting th	ne stude	ent or th	he student's imme	ediate family which co	ould
be alleviated as a re		,							
ESD Employee	List Work site:								
Services Required	:								
I understand I am responsible		from school.	Yes	D No	Please	initial:			
Does the student's day care provider reside within the requested school's boundary?			Yes	🛛 No					
Does the student receive special education /related services?			🛛 Yes	🛛 No					
Has the student previously qualified for or been enrolled in a Special Service Program?			Yes	🛛 No	lf yes, e	explain:_			
In what district were the prev	vious special educatio	n services prov	vided?	District Nam	1e:				
Does the student receive Se	Yes	🛛 No							
Does the student receive ELL services?			Yes	🛛 No					
Has the student been suspended/expelled at previous school?			Yes	🛛 No	•				
Has the student had excess Truancy petition filed?	Yes (11+ absences	No es (0-10 absences		explain:					

In addition to the foregoing, any intradistrict transfer or non-resident admission must be in compliance with all other district policies including those relating to student attendance, academic standards, discipline/behavior, and class size and are subject to annual review. SEE REVERSE FOR PARENT SIGNATURE AND POLICIES.

Applicant Waiver Conditions for Eatonville School District (ESD)

Applications for admission shall be reviewed based upon the following:

- A space in appropriate courses or programs at the non-resident/neighborhood school depends on availability.
- Students who reside within the Eatonville School District will be given priority for placement in special
 programs. In the event there is a waiting list for placement in such a program, students living outside the
 district will not be placed until all students who reside within the district have been placed.
- If excess enrollments make it necessary to move students to other schools within the district to adjust class size, children who live outside any school boundary may be moved to another school.
- It is important that students arrive at school at the designated starting time and attend school regularly. Excessive tardies and/or absences may result in the discontinuance of this transfer/waiver at any time.
- Students must maintain passing grades and/or satisfactory academic progress in all classes at quarters, semesters, and trimesters. Poor grades may result in the discontinuance of this transfer/waiver at any time.
- Students are required to obey all school and district rules and regulations. Repeated and/or serious discipline problems will result in the discontinuance of this transfer/waiver at any time.
- If student becomes eligible for special education services while attending ESD, the student will transfer back to his/her non-resident school at the end of that school year.

<u>Athletic Eligibility</u>: As per Washington Interscholastic Activities Association Rules, students are not eligible for varsity competition at the high school level unless a hardship exists and subsequent appeal is granted, or unless the student has attended Eatonville School District for at least one year.

<u>**Transportation**</u> for students residing outside the Eatonville School District is the responsibility of the parent/guardian.

- I verify that the above information is accurate and current and I understand this waiver may be rescinded if found falsified.
- I understand an approved district release from the student's resident district **MUST BE ATTACHED**.
- I understand this release will be in effect for the grade group requested unless rescinded.
- I have read and understand the conditions listed on this form and I further understand this waiver may be rescinded at any time during the year if the conditions are not met.

The Eatonville School District reserves the right to revoke this transfer at any time through the school year if the student or parent does not adhere to these conditions. If it becomes necessary to change placement of the student, this agreement shall become null and void.

Parent/Guardian Signature:

Date:

FOR OFFICE USE ONLY

SECTION II (DISTRICT USE ONLY)

Is there room in the class, core class, program or ac		C Yes	🛛 No		
If applicable, have IEP services, at the transfer scho		C Yes	🛛 No		
SECTION III (DISTRICT USE ONLY)					
Current/Assigned School Principal:	Approve Deny	Signature:		_ Date:	
Requested School Principal:	Approve Deny	Signature:		Date:	
Student Services Director:	Approve Deny	Signature:		Date:	
Having examined the above, this transfer request for the 20 to 20 is:					enied
Superintendent/Designee Signature:			Date:		