

**Jefferson County
School District 509J**

Code: **JECB-AR(4)**
Revised/Reviewed: 7/23/18

Request for Nonresident Student Admission – Interdistrict Transfer

Current School Year _____
Transfer requested for School Year _____

For Office Use Only Student ID# _____

Student Information

Legal Last Name _____ Legal First Name _____ Legal Middle Name _____
Mailing Address _____ Apartment # _____
City _____ State _____ Zip _____
Date of Birth _____ (MM/DD/YY) Student's Current Grade Level _____
Primary Phone of Parent/Guardian _____ Secondary Phone _____
E-mail Address _____

Parent/Guardian Name (Person in Parental Relationship) _____

Is the student currently under expulsion? Yes No
If yes, what was the reason? _____

Is there a sibling of this applicant currently attending in this district? Yes No
If yes, name of sibling and school attending: _____

Does the student have a transfer for the current school year? Yes No

Has the student attended a public charter school in the district for three consecutive years; finished the highest grade possible in that school; and has not attended another school outside the district since completing that highest grade? Yes No

Is, or was the student a resident of this district in the current school year? Yes¹ No
If yes, please provide move/moving date: _____

Preferred School placement _____

Signature of Parent/Guardian _____ Date _____

For Office Use Only: Final Action of Nonresident District: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Lottery number _____ Reason for denial: _____ _____ Superintendent/Designee: _____ Date _____
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¹If applicant chooses "Yes," the district must give consent for admission pursuant to ORS 339.127(10).