

**Klamath County
School District**

Code: **JECB-AR(1)**
Revised/Reviewed: 2/20/14; 11/20/14; 8/20/15;
2/19/16; 2/16/17
Orig. Code(s): FORM B

Request for Nonresident Student Admission – Open Enrollment Transfer

Current School Year _____ **Requested School 1st Choice** _____

Transfer requested for School Year _____ **Requested School 2st Choice** _____

Student Information

Legal Last Name _____ Legal First Name _____ Legal Middle Name _____

Mailing Address _____ Apartment # _____

City _____ State _____ Zip _____

Date of Birth _____ (MM/DD/YY) Student Grade Level in [2017-2018] _____

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: _____

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

Signature of Parent/Guardian _____ Date _____

For Office Use Only:

Final Action of Nonresident District: Approved Denied Lottery number _____

Reason for denial: _____

Klamath County School District Transfer Office: _____ Date _____