

Molalla River School District

Code: **JECF-AR**
 Adopted: 6/12/08
 Orig. Code(s): JECA/JECB

Interdistrict Transfer of Resident Students

RESIDENT DISTRICT TRANSFER REQUEST FORM

School Year (one year only)

Student name	Requested nonresident district
Current street address	Requested nonresident school
City/State/Zip Code	Resident school
Mailing address (if different than street address)	Student's date of birth Student's grade level
Name of person making application	Relationship to student
Street address (indicate if same as above)	How long have you lived at this address? Are you able to provide transportation?
City/State/Zip Code	Home telephone Work telephone

Please complete the reverse side of this form

Final Action of Resident District	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ Superintendent or Designee's Signature	_____ Printed Name/Title	_____ Date

Nonresident District Use Only

Comments: _____

Final Action of Nonresident District	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
_____ Superintendent or Designee's Signature	_____ Printed Name/Title	_____ Date

If the student is in any special programs, please list: _____

Does the student have an IEP? _____ If yes, attach a copy of the IEP and evaluation.

Is the student involved in OSAA activities? (high school students only) Yes No

Has the student been suspended? Yes No For what? _____
When? _____

Has the student been expelled? Yes No For what? _____
When? _____

Is the expulsion still in force? Yes No

Reason for Request (be specific, attach additional pages if necessary):

I hereby certify that the information I have provided is true. I understand that falsely responding to any of the questions herein will result in denial and/or revocation of the request. I acknowledge that the resident and nonresident districts will exchange student educational records and other educationally relevant information.

Signature of Parent/Guardian

Date of Application

Return completed form to:

Molalla River School District #35
Office of the Superintendent
PO Box 188
Molalla, OR 97038