

LINDSAY INDEPENDENT SCHOOL DISTRICT

495 6th Street
P O. Box 145
Lindsay, TX 76250
Phone (940) 668-8923
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APPLICATION DEADLINE: May 1st New Incoming Student

NONRESIDENT STUDENT REQUEST TO TRANSFER INTO LINDSAY ISD

1. Student's name: First: _____ Middle: _____ Last: _____
2. Physical address: _____
Mailing address: _____
City, State, Zip Code: _____
3. Student's Date of Birth: _____ Social Security Number: _____
4. School District in which student resides: _____ Last School Attended: _____
5. Parent's name(s): _____
6. Parent's address: _____
City, State, Zip Code: _____
7. Home Phone #: () _____
8. Work Phone #: () _____
9. Cell Phone #: () _____
10. Reason for transfer request: _____

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11. Is either parent employed by Lindsay ISD? { } Yes { } No
 12. Has the student ever been enrolled in Lindsay ISD? { } Yes { } No
 13. Does the student have any siblings currently attending Lindsay ISD? { } Yes { } No
 14. Year of requested transfer. (i.e. 2017-18) _____
 15. Student's grade level for year of requested transfer: _____
 16. Student's attendance record:
 - a. How many days was the student absent in the school year prior to the year for which a transfer is requested? _____
 - b. If the student missed more than 5% of the days in the school year, please provide an explanation: _____
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17. Has the student been expelled or removed to a DAEP for one or more days in the most recent school year?
 { } Yes { } No During the preceding year? { } Yes { } No
 If yes to either question, for what offense(s)? _____

****Please attach a copy of grades, attendance and discipline records from the student's current school if possible. Please attach a copy of the previous school year's TAKS and/or STAAR testing records.**

As a parent or person standing in the position of legal responsibility for the child named in this request, I acknowledge that I have received a copy of Lindsay ISD's policies FDA(LEGAL) and FDA(LOCAL) and the Transfer Agreement that must be executed before the child is enrolled in the District. The information provided in this form is true and factual to the best of my knowledge, and I understand that if any of this information is ever found to be incorrect, this application may be denied or revoked.

Parent Signature _____ Date _____

For consideration of this request, the campus principal to which the child requests to enroll will schedule an interview with the child and parent. New transfer applicants are reviewed, interviewed, recommended to the Superintendent and approved by the Board of Trustees each year in June.

LINDSAY ISD TRANSFER AGREEMENT

SCHOOL YEAR: _____

This Transfer Agreement establishes the terms and conditions for _____ ("student") to attend the Lindsay ISD public schools ("District") as a transfer student for the noted school year, although the student is a resident of the _____ ISD. The student's parent or other person having lawful control of the student, _____ ("parent"), requests that the student be permitted to attend District schools in the noted school year and agrees to the following terms and conditions for that transfer:

1. This transfer is effective for the current school year only. District approval of this transfer creates no right or expectation that the student will be admitted as a transfer for any subsequent school year.
2. This transfer is approved for the named student only. District approval of this transfer creates no right or expectation that another student from the same family will be admitted as a transfer.
3. The student must maintain acceptable levels of attendance and compliance with District rules and regulations, including the Student Code of Conduct, throughout the entire school year. Acceptable levels are defined as:
 - a. Attendance that does not place the student at risk of losing credit under Education Code 25.092 or require the District to warn the parent or the student of truancy proceedings under Education Code 25.095;
 - b. Compliance with the District's rules and regulations, including the Student Code of Conduct, such that no offenses result in removal to a disciplinary alternative education program or expulsion, and that the student does not have a significant number of discipline referrals made within any grading period for other misconduct, as determined by the campus principals.
4. The student must maintain appropriate academic progress throughout the school year.
5. In accordance with Board policy FDA(LOCAL), the Superintendent may revoke the transfer of a student who fails to maintain an acceptable level of attendance or compliance with District rules and regulations, including the Student Code of Conduct. Notice of revocation will be sent to the district of residence.
6. The parent or the student will be responsible for transportation to and from the District school to which the student is assigned.
7. The student and parent acknowledge that eligibility of transfer students for participation in any UIL activity or other activities governed by UIL rules and regulations will be determined in accordance with UIL rules and regulations.
8. Except as modified by this transfer agreement, the student will be subject to all policies, regulations, rights, privileges, and responsibilities of enrollment in the District as if he or she resided in the District.

The District and the parent agree that this transfer agreement is the entire agreement controlling the admission and enrollment of the student in the District for the noted school year.

Parent's signature _____ Date: _____

Interviewed by _____ Date: _____

Comments: _____

The above transfer was:	approved disapproved	on this _____ day of _____ 20____	
Lindsay ISD Superintendent Larry Smith	Telephone (940)668-8923 x106	Signature	Date