

REQUEST FOR STUDENT ATTENDANCE AREA TRANSFER Between Schools in the Bellingham School District

FOR THE SCHOOL YEAR: _____ DATE OF REQUEST: _____
STUDENT NAME: _____ BIRTHDATE: _____
PARENT/GUARDIAN NAME: _____
ADDRESS: _____ ZIP: _____
HOME PHONE: _____ CELL PHONE: _____
WORK PHONE: _____ EMAIL ADDRESS: _____
GRADE LEVEL FOR YEAR OF TRANSFER: _____
CURRENT SCHOOL: _____
ATTENDANCE AREA SCHOOL FOR YOUR HOME ADDRESS: _____
SCHOOL YOU ARE REQUESTING A TRANSFER TO: _____

Identify below the basis for the request and the specific reason for this transfer request. Please provide as much information as possible; attach supporting documentation as needed.

A financial, educational, safety, or health condition affecting the student would be reasonably improved as a result of the transfer. Explain (optional): _____

Attendance at the school requested is more accessible to the parent's place of work or to the location of childcare.

Address: _____

Some other special circumstances affecting the student or student's immediate family which could be alleviated as a result of a transfer. (e.g. new attendance areas)

Please explain: _____

Parent/guardian is a Bellingham School District Employee (ESSB 5142)

Parent name: _____ Work assignment: _____

- I understand this application is valid for one school year.
- Parent(s)/Guardian(s)/Student are responsible for transportation between the student's home and the requested school.
- Lack of academic effort, poor attendance, tardiness or discipline problems shall provide just cause for the district to return a student to their attendance area school.
- Transfer decisions may not be made until after the third week in August.
- If a transfer request is denied, the parent/guardian may appeal to the superintendent or designee in writing within ten school days of denial notification for a review of the decision by the building principal.

- Per WIAA rules, varsity participation in receiving school may be suspended for one year based on eligibility requirements (consult WIAA 18.11-13).
- I have had a conversation with my child's neighborhood (attendance area) school administrator (for new requests only).

I have read policy and procedure 3131 and agree to assume the responsibilities associated with an attendance area transfer as listed above.

Signature of Parent or Legal Guardian

Print and drop off completed form to the school you are requesting to attend next fall.

Internal Use Only New request Continuing request to requested school

Step 1. Signature of Neighborhood School Administrator _____

Accept Deny – Circle Reason: Space/Discipline/Attendance Route to Requested School

Step 2. Signature of Requested School Administrator _____

Accept Deny – Circle Reason: Space/Discipline/Attendance Route to Deputy or Asst. Superintendent

Step 3. Signature of Deputy or Assistant Superintendent _____

Accept Deny – Circle Reason: Space/Discipline/Attendance Route to Requested School