



Park Hill School District

GRANDFATHERING TRANSFER REQUEST FORM

One student per form

Office Use Only: Residency Documentation

Received by (initials): _____

Date received: _____

Verified redistricted address

Forwarded to Director of Student Services

Transfer Request Deadlines:

- February 1, 2019 for students who will be in high school in 2019-2020
- March 1, 2019 for students who will be in fifth grade in 2019-2020

Eligibility to Transfer Back to Current School:

- Student must live in the Park Hill School District.
- Student must be a current fourth, ninth, 10th or 11th grader.
- Student's address must be one that we moved in the new redistricting.

Date of Request: _____

PARENT/GUARDIAN INFORMATION (Must be completed by the legal guardian with whom the student lives)

Name: _____

Full Address: _____

Primary Phone Number: _____

Primary Email: _____

STUDENT INFORMATION:

Student Name: _____

Student ID#: _____ 2018-2019 Grade Level: _____

Current, requested school: _____ Assigned school in redistricting: _____

Families must provide transportation for students who transfer. How will you transport your student to and from school?

If approved, the requested school will become your student's resident school. Families may not request a transfer back to the other school. This will remain in effect until a fifth grader moves on to sixth grade or a high-school student graduates, unless the student or family is unable to meet the terms and conditions listed below:

- The director of student services must approve all transfers.
- Families must prove and maintain residency each year.
- Families who have students who will be sophomores that want to stay at PHHS should know that those students will not be able to park in the school parking lot.
- The student must attend school regularly, with an overall attendance percentage at or above 90 percent.
- The student must abide by district and school expectations for arrival to school and dismissal from school.
- Student attendance issues involving excessive absences, truanancies or tardiness could lead to the immediate revocation of an approved transfer at any time during the school year.

I understand the above terms and conditions and that if they are not met, my student could be transferred to the school assigned in redistricting.

Signature of Parent/Legal Guardian

Date

Return this form to your current school's office by February 1, 2019 if your student will be in high school or by March 1, 2019 if your student will be in fifth grade.

DISTRICT OFFICE USE ONLY:

Director of Student Services signature : _____ Approved _____ Denied _____

If denied, reason:

