

SABINAL ISD NON-RESIDENT STUDENT APPLICATION FOR TRANSFER FORM

1. Student's name: _____

2. Current address: _____

3. School district in which student resides: _____

4. Parent's name: _____

5. Parent's address: _____

E-mail address: _____

Home phone: _____ Cell phone: _____ Work phone: _____

6. Reason for transfer request:

7. Is either parent employed by the Sabinal ISD? Yes No

8. Has the student ever been enrolled in the Sabinal ISD? Yes No

9. What is the last grade level your student enrolled in?

10. What is the grade level your student will be enrolled in?

11. Name of previous campus and school district _____

12. Date of withdrawal from previous school _____

13. 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? _____

OR

b. If this request is for a transfer during a school year, how many days has the student missed in the current school year? _____

c. If the student missed more than five (5%) percent of the days in the school year (9 days), please provide an explanation:

14. Has the student been placed into In School Suspension for one or more days in the most recent and/or current school year? Yes No

If yes, how many days and why? _____

15. Has the student been expelled or removed to a DAEP for one or more days in the most recent and/or current school year? Yes No During the preceding year? Yes No

If yes to either question, for what offense(s)? _____

As a parent or person standing in the position of legal responsibility for the child named in this student transfer request, I acknowledged that I have access and have read the Sabinal ISD Board Policy FDA (LEGAL) & FDA (LOCAL), the contents within the Transfer Agreement & Request Forms and that all information must be executed before the child is enrolled in the District. I acknowledge that the information provided in this form is true and factual, and I understand that if any of this information is ever found to be incorrect, that this application may be denied and/or my child's transfer approval revoked.

Parent Printed Name: _____ Date: _____

Parent Signature: _____ Date: _____

Principal's Signature: _____ Date: _____

Transfer Recommended Disapproved

STUDENT CONFIDENTIAL REQUEST FOR STAAR/EOC SCORES

I, _____, give Sabinal ISD permission to access STAAR/EOC scores for my child, _____, to be used only for the purposes of determining eligibility for student transfer to Sabinal ISD. These scores will remain confidential at all times.

Parent Printed Name

Parent Signature

Date

Sabinal Independent School District

409 W. Cullins Ave.
Phone: 830.988.2472 Fax: 830.988.7151

NON-RESIDENT STUDENT REQUEST TO TRANSFER INTO THE DISTRICT

Your child's request for transfer application should include:

- School Records (including transcript & shot records)
- Attendance Records
- Discipline Records
- Most Recent Report Card
- Either the Most Recent STAAR/EOC Score Reports (grades 3-12 only)
- K-12 Diagnostic Assessments (e.g., NWEA, TPRI & Circle)
- All other Educational Supporting Documents

Please include the documents listed above when submitting this application. Until this application is complete, including all applicable documentation listed above, your child's transfer request may not be considered. Please complete the following fields in the application prior to submitting this transfer request to the Sabinal Independent School District. It is important to note, if you have multiple children for whom you wish to request transfer, a separate application must be completed for each of those children.

Also, please be advised that knowingly presenting false information on the transfer application and requested documentation shall result in automatic denial of the transfer status. If false information is knowingly provided by the student or the persons representing the student, during the school year, the student transfer will be immediately, automatically, and permanently revoked. The student's resident district shall be notified in writing, and charges may be filed with proper authorities. In addition to the transfer being revoked, the parent may be, under the provisions of Texas Education Code (TEC) 20.002(d), liable for payment of tuition and fines.

Sabinal Independent School District

409 W. Cullins Ave.

Phone: 830.988.2472

Fax: 830.988.7151

TRANSFER AGREEMENT

This Student Transfer Agreement establishes the terms and conditions for (“Student”) to attend the Sabinal Independent School District (“District”) as a transfer student for the ____ - ____ school year, although the student is a resident of another independent school district. The student’s parent or other person having lawful control of the student, _____ (“Parent”), requests that Student be permitted to attend Sabinal ISD schools in the ____ - ____ school year. The Parent and Student understand and acknowledge that attendance at the District as a transfer student is a privilege, not a right, and as such, transfer students and parents must abide by this Transfer Agreement. In order to make the experience positive and productive for transfer students, this Transfer Agreement has been developed and shall govern transfer decisions made for and about transfer students. No property interest is created in or by this Transfer Agreement. Parent and Student acknowledge that because the Student is not a resident of the District, any right of Student to become or remain enrolled in the District or to receive any educational services from the District is based on this Agreement only. Parent and Student also acknowledge and understand transfer applications are considered on an individual basis without regard to sex, race, national origin, religion, disability, or ancestral language. In making transfer decisions, the Superintendent may consider (among other things): academic records; class sizes; availability of resources, space, and instructional staff; the student’s disciplinary records or criminal history; attendance records; and any potential adverse effect on resident students. Parent and Student hereby agree to the following terms and conditions for a 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 (a) maintain an acceptable level of attendance, (b) maintain an acceptable level of academic performance, and (c) maintain compliance with all District policies, rules and regulations, including the Student Code of Conduct, throughout the entire school year, and a failure to do so may result in revocation of this Transfer Agreement. Under this Transfer Agreement:**
 - (a) Acceptable level of attendance is deemed to be no less than a daily attendance rate of 95%. In compliance with Texas Education Code 25.092 and Code 25.095, the District will contact parents with respect to the credit and legal implications of poor attendance. No more than 9 absences will be allowed per school year, unless deemed excused by the principal.
 - **As a condition of this agreement, three (3) tardies will be equivalent to one (1) unexcused absence.**

- (b) **Acceptable level of academic performance is defined as a student successfully completing all classes with a grade of no less than 70, as well as taking and passing all required state mandated STAAR/EOC tests.**
- (c) Compliance with the District’s policies, rules and regulations, including the Student Code of Conduct, is deemed to mean that the Student will not engage in any prohibited conduct or violations that can result in student removal to a disciplinary alternative education program or expulsion, or engages any misbehavior that results in an **accumulation of more than three (3) days of ISS and/or an accumulation of more than two (2) days of OSS from the date of enrollment or beginning of current school year to the end of the current school year.**
4. As previously noted, and 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, maintain academic standards, and maintain compliance with District rules and regulations, including the Student Code of Conduct. Notice of revocation will be sent to the district of residence. The Student and Parent have the right to appeal the decision made concerning student transfer status, in accordance with Board Policies FNG (LEGAL) and (LOCAL).
 5. If this Transfer Agreement is revoked, the Principal or Superintendent has discretion to revoke the transfer immediately if the appropriate administrator’s professional judgment that the student’s continued attendance threatens the safety of other students or teachers or will be detrimental to the educational process. In addition, revocation will be immediately effective if the reason for revocation is the Student’s commits a violation of the Student Code of Conduct that results in expulsion or placement into a disciplinary alternative education program.
 6. The Parent or the Student will be responsible for transportation to and from the District school or to the designated pick-up areas for bus transportation services. There will be no “door to door” transportation services for students residing outside the district boundaries. Parents will be expected to be at the designated pickup and drop-off area in a timely manner. The bus will stay in the designated area for a 10-minute window and if students are not picked up on time it will trigger a bus referral. Multiple referrals could trigger revocation of bus riding privileges. Please refer to the Bus Rider Safety Handbook for rules and regulations.
 7. The student and parent acknowledge that eligibility of transfer student for participation in any University Interscholastic League (UIL) activity or other activities governed by UIL rules and regulations will be determined in accordance with those rules and regulations. By signing the Agreement, Parent and Student acknowledge that the constitution or rules of the UIL may require the District to exclude the student from participating in certain extracurricular interscholastic competitions.
 8. Except as modified by this Transfer Agreement, the Parent and the Student will be subject to all policies, regulations, rights, privileges, and responsibilities of enrollment in the District as if the Student resided in the District.
 9. At the time of signing of this Transfer Agreement, the District does not charge tuition to non-resident transfer students. However, the District retains the right to charge tuition at any time in the future it deems appropriate to do so. If tuition is to be charged, the tuition amount will be set by using the tuition limit worksheet set forth by the Texas Education Agency. Notification of tuition payments would be sent to all non-resident transfer students at that time. If charged, all tuition payments will be made in accordance with the school board policy FDA (LOCAL). If the Board should determine a need to charge tuition, such a change shall be instituted at the start of any semester.

The District, the Parent and the Student agree that this Transfer Agreement is the entire agreement controlling the admission and enrollment of the student in the District for the _____ - _____ school year. No transfer is granted until the Superintendent's signature appears on this Transfer Agreement.

We have read and understand the information contained in this Agreement and by signing below do hereby agree to adhere to its provisions and terms, and to abide by all policies and administrative regulations of Sabinal ISD. **IN RETURN FOR THE DISTRICT PERMITTING THE STUDENT TO TRANSFER INTO A DISTRICT SCHOOL, WE EXPRESSLY WAIVE AND RELEASE ANY CLAIM THAT WE MAY HAVE THAT THE DISTRICT CANNOT REVOKE A TRANSFER, OR THAT THE TRANSFER OF THE STUDENT MUST BE FOR A PERIOD OF ONE YEAR. BY OUR SIGNATURES BELOW, WE EXPRESSLY CONFIRM THAT WE AGREE WITH AND ACCEPT ALL OF THE REASONS FOR TRANSFER REVOCATION SET OUT IN TRANSFER AGREEMENT, AND FURTHER AGREE THAT THIS AGREEMENT CAN BE REVOKED FOR ANY OF THOSE REASONS BEFORE THE END OF THE YEAR FOR WHICH THE TRANSFER IS APPROVED.** In the event of revocation, we agree that the student will on the effective date of the revocation be enrolled in the District of residence, another public school, or a private school that meets the curriculum requirements of state law.

Student Printed Name

Grade

Student Signature

Date

Parent/Guardian Printed Name

Parent/Guardian Signature

Date

ACCEPTED AND APPROVED:

Principal's Signature

Superintendent Signature

DATE: _____