

Enrollment Approved \square Yes \square No

REQUEST FOR OUT-OF-DISTRICT TRANSFER

| DISTRICT USE ONLY | | | | | |
|--------------------|-------|------------|--|--|--|
| IEP/504 | □NA | ☐ Attached | | | |
| Behavior Agreement | □NA | ☐ Attached | | | |
| Placement Accepted | ☐ Yes | □ No | | | |

DATE

| Student Name | | Grade | Birth Date | | |
|--|--|--|--|--|--|
| Legal Address | City | | State | Zip | |
| Phone | Email | | | | |
| Current School | Boundary School | | Requested School | | |
| Reason for Request | | | | | |
| Provisional Enrollment A student may be denied an open of school consistent with 53G-6-402(6) | | | has been suspended o | or expelled from a public | |
| A student with prior behavioral pro an agreement with the school or the notifying the parents/student that or school district is responsible for | ne school district (1) est the student will be exc | ablishing the o | onditions of continued school if the agreeme | d enrollment, and (2) | |
| Has the student ever been suspended of intervention/disciplinary action? Sus | spended/Expelled \Box | Yes □ No | Behavioral | es that have required Issues Yes No | |
| Special Programs Is your student currently enrolled in an ☐ N/A ☐ Speech ☐ Resource-Mild | | | | □ 504 | |
| If accommodation checked, a copy of the state of the stat | | - | | m. The receiving principa | |
| Agreements I understand that: all transfer requests are contingent enrollment school capacity ('maximulate enrollment school capacity ('adj special program limitations, staff avacircumstances under Section 53G-6- | um capacity') or justed capacity'), ailability, and/or | transp • a stude | ot establish UHSAA (st | • | |
| An enrolled nonresident student shall be students, without renewed application. the student moves from elementary middle to high school, graduates, or resident | s in subsequent years ι to middle school, | enrolled, subj Inless any of th • the stu • the dis | ect to the same rules a ne following occurs: ndent is suspended or | expelled from school school enrollment will | |
| My child is willing to comply with the polici | es of the Wasatch County | School District. | · | | |
| l verify the information given on this docum placement in a school. I further understand application can be submitted per child. | | | | _ | |
| I understand that a child admitted under fa understand that it is my responsibility as th orovided. | | | | | |
| Parent/Guardian Signature | PI | none | Date | School Year | |

STUDENT SERVICES DIRECTOR SIGNATURE