

**Norman Public Schools
Intra-District Transfer Request
For School Year 2009-2010**

_____	_____	_____	_____
School Requested	2009-2010 Grade	Student ID	Date Received

Student Information

Student Name _____			
Last	First	M.I.	Birthdate
Address _____			
Street	City	Zip	
Parent/Guardian _____		Home Phone	Work Phone
_____		_____	
Neighborhood School	School Currently Attending		

List Previous Schools			
Circle Yes or No			
Enrolled in a Special Education or Title I program..... Yes No			
If yes, what program _____			
Involved in extra-curricular activities (Grades 7-12 only)..... Yes No			
If yes, what activity(ies) _____			
If transfer is denied, I desire this request to be placed on a waiting list..... Yes No			
Reason(s)for request: _____			

If approved, this transfer is for the 2009-2010 school year. I further understand that: (1) I will be responsible for furnishing transportation of my child to and from school, and (2) the transfer may be revoked by the school principal if the student's grades, attendance (absences or tardies), transportation arrangements, or behavior reach an unacceptable level.			
_____		_____	
Parent/Guardian	Relationship to Student	Date	

Priority Levels

Check applicable item(s):

1. Junior or Senior level students affected by residence change within the district

2. Siblings of a student currently in attendance on a transfer: **Sibling** _____ **Grade** _____

3. District employees' children

4. Students who have continuously attended as a resident of a Norman school for at least two years and are subsequently affected by a residence change within the District

5. Students currently attending on a transfer who desire to remain at the school and within its vertical feeder pattern

6. A student whose parents, or parent, are employed outside of the home, or are unable to care for the pupil and must secure care for the child during part of the day in an area where care is available

7. Students who reside in the District and are supporting themselves entirely by their own efforts

8. A high school student whose work schedule creates a hardship in attendance in his/her regular attendance area

9. All other NPS students requesting transfers

Incomplete transfer forms cannot be processed. Requests will be acted upon in accordance with the district attendance policy. Any approved transfer found to be based upon false information will be subject to revocation.

<input type="checkbox"/> Transfer Approved <input type="checkbox"/> Current Year Only <input type="checkbox"/> Renewal <input type="checkbox"/> Ineligibility Applies <input type="checkbox"/> Six Months <input type="checkbox"/> Calendar Year <input type="checkbox"/> Returned to Home School	School Use Only _____ Director /Principal Date	<input type="checkbox"/> Transfer Denied <input type="checkbox"/> Space <input type="checkbox"/> Other <input type="checkbox"/> Renewal <input type="checkbox"/> Trans. Revoked
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