Please drop off, mail, fax or email the completed form

cale.george@sheridan.k12.or.us



435 S Bridge Street, Sheridan Oregon 97378
Phone: (971) 261-6959 Fax: (503) 843-3505 www.sheridan.k12.or.us

Dorie Vickery, Superintendent

Inter-District Transfer Form

To be completed by Parent/Guardian - Please Print

Last Name, First Name, Middle Initial Date of Birth: School Year: Grade: MM/DD/YYYY YY/YY Physical Address: Mailing Address: City: State: Zip Code: Primary Phone of Parent/Guardian: Has the Student ever been expelled/ currently facing expulsion?	Student Legal Name:			
MM/DD/YYYY YY/YY Physical Address:	Last Nar	me, First Name, Middle Initial		
Physical Address:	Date of Birth:	School Ye	ar:	Grade:
Mailing Address:	· ·		•	
City: State: Zip Code: Primary Phone of Parent/Guardian: Has the Student ever been expelled/ currently facing expulsion?	Physical Address:			
Primary Phone of Parent/Guardian:	Mailing Address:			
Has the Student ever been expelled/ currently facing expulsion? No Yes If yes, what was the reason?	City:	State:	Zip Code:	
If yes, what was the reason? Please be advised that if this transfer is approved, the student will have completed an academic transfer. An academic transfer does not guarantee eligibility to participate in competitive interscholastic activities at the receiving school. Eligibility to participate is determined by the Oregon Schools Activities Association (OSAA) rules. For questions about OSAA eligibility, please contact the receiving school prior to completing this transfer. Requested School and District: By signing below, you understand that you assume all responsibility for transportation and this agreement may be revoked at any time for failure to abide by school rules or irregular attendance. You are authorizing the release and exchange of confidential information regarding the student named on this form. Printed name Signature Date OFFICE USE ONLY: Action of Sheridan School District: Approved Denied on for denial: Printendent/Designee: Date: Action of Nonresident District: Approved Denied on for denial:	Primary Phone of Parent/Gua	ardian:		
Please be advised that if this transfer is approved, the student will have completed an academic transfer. An academic transfer does not guarantee eligibility to participate in competitive interscholastic activities at the receiving school. Eligibility to participate is determined by the Oregon Schools Activities Association (OSAA) rules. For questions about OSAA eligibility, please contact the receiving school prior to completing this transfer. Requested School and District: By signing below, you understand that you assume all responsibility for transportation and this agreement may be revoked at any time for failure to abide by school rules or irregular attendance. You are authorizing the release and exchange of confidential information regarding the student named on this form. Printed name Signature Date OFFICE USE ONLY: Action of Sheridan School District: Approved Denied on for denial: Printendent/Designee: Date: Action of Nonresident District: Approved Denied on for denial:	Has the Student ever been ex	opelled/ currently facing expu	lsion? 🔲 No	☐ Yes
does not guarantee eligibility to participate in competitive interscholastic activities at the receiving school. Eligibility to participate is determined by the Oregon Schools Activities Association (OSAA) rules. For questions about OSAA eligibility, please contact the receiving school prior to completing this transfer. Requested School and District: By signing below, you understand that you assume all responsibility for transportation and this agreement may be revoked at any time for failure to abide by school rules or irregular attendance. You are authorizing the release and exchange of confidential information regarding the student named on this form. Printed name Signature Date OFFICE USE ONLY: Action of Sheridan School District: Approved Denied on for denial: Printedname: Action of Nonresident District: Approved Denied on for denial:	If yes, what was the reason?			
any time for failure to abide by school rules or irregular attendance. You are authorizing the release and exchange of confidential information regarding the student named on this form. Printed name Signature Date OFFICE USE ONLY: Action of Sheridan School District: Approved Denied on for denial: printendent/Designee: Action of Nonresident District: Approved Denied on for denial:		o completing this transfer.		
OFFICE USE ONLY: Action of Sheridan School District: Approved Denied Date: Date: Date:	contact the receiving school prior to			
Action of Sheridan School District: Approved Denied on for denial: crintendent/Designee: Date: Action of Nonresident District: Approved Denied on for denial:	Requested School and District By signing below, you understand the any time for failure to abide by school	t:nat you assume all responsibility for roll rules or irregular attendance. Yo	transportation and this	agreement may be revoked at
Action of Sheridan School District: Approved Denied on for denial: Date: Action of Nonresident District: Approved Denied on for denial:	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to	t:nat you assume all responsibility for pol rules or irregular attendance. Yo the student named on this form.	transportation and this	agreement may be revoked at ease and exchange of
on for denial: Date: Date: Date: On for denial: Denied On for denial: Denied Denied	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the printed name	t:nat you assume all responsibility for pol rules or irregular attendance. Yo the student named on this form.	transportation and this	agreement may be revoked at ease and exchange of
Action of Nonresident District: Approved Denied on for denial:	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the printed name OFFICE USE ONLY:	t:nat you assume all responsibility for pol rules or irregular attendance. Yo the student named on this form. Signature	transportation and this	agreement may be revoked at ease and exchange of
Action of Nonresident District: Approved Denied	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School Distriction in the	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of
on for denial:	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School District on for denial:	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of
on for denial:	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School District on for denial:	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of Date
	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School District on for denial:	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of Date
rintendent/Designee: Date:	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School District on for denial: intendent/Designee:	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of Date
	Requested School and District By signing below, you understand the any time for failure to abide by school confidential information regarding to the Printed name OFFICE USE ONLY: Action of Sheridan School District intendent/Designee: Intendent/Designee:	t:	transportation and this u are authorizing the rel	agreement may be revoked at ease and exchange of Date

Please drop off, mail, fax or email the completed form

cale.george@sheridan.k12.or.us



435 S Bridge Street, Sheridan Oregon 97378 Phone: (971) 261-6959 Fax: (503) 843-3505 www.sheridan.k12.or.us

Dorie Vickery, Superintendent

Optional Information:

Sheridan School District would like to know why you are requesting a transfer so we may better serve our students. This is optional information and will only be shared with the superintendent.

Reason for requesting transfer:
☐ Requested district is closer to work
☐ Family members live in requested district
□ Bullying
☐ Educational opportunities offered at requested district
☐ School Setting
☐ Problem with teacher/staff
☐ Specialized education at requested district
☐ Childcare
Additional information for requesting transfer:

Sheridan School District 48J

Code: JECF Adopted: 6/10/10

Revised/Readopted: 6/20/12; 10/17/12; 5/21/14; 12/17/14; 12/13/17; 10/16/19

Orig. Code: JECF

Interdistrict Transfer of Resident Students

Release of Resident Students

The Board recognizes there may be circumstances that arise in which a resident student may benefit from attendance in another public school in the State. Consequently, a student who resides within district boundaries may be released, under criteria identified in administrative regulation, to attend school in another district that agrees to accept the student. The agreement will be by written consent of the affected school boards or designees whereby the student becomes a "resident student" of the attending district, allowing the attending district to receive State School Fund monies. Any additional fees or tuition costs are the responsibility of the parent.

When the resident district approves the release of a resident student to another school district, the student or their parent(s) will be solely responsible for transportation unless federal or state law requires transportation be provided by the district. When a resident student, who is on an individualized education plan (IEP), is accepted to another district by an interdistrict transfer, the attending district becomes responsible for a free appropriate public education (FAPE).

Additionally, an inter-district transfer of a resident student will be permitted, as appropriate, to meet the requirements of the Every Student Succeeds Act of 2015 (ESSA).

The district may not impose any limitations on the length of time for which consent is given to the student requesting release to another district.

The district shall not require a student to receive consent more than one time when the student requests admission to the same receiving district, regardless of any time limitations imposed by the receiving district.

The district shall allow the student whose legal residence changes to a different district during the school year or summer between school years, to complete the school year in the district if the student chooses to do so.

Safe Public School Choice Transfer Requests

An inter-district transfer¹ may also be permitted in the event a student has been a victim of a violent criminal offense occurring in or on the grounds of a school the student attends or the student attends a school identified as persistently dangerous, and all other district schools the student may transfer to are also identified as persistently dangerous or there is no other district school to which the student may transfer. The transfer must be to a safe school.

Homeless Student

A homeless student residing in the district and the student's parent, or in the case of an unaccompanied student, the district's liaison for homeless students, may request that the student attend their school of origin², located out-of-district. The request will be considered based on the best interest of the student. The student may continue in their school of origin for the duration of the student's homelessness. Transportation will{FN:3} be provided in accordance with law.

The superintendent is directed to establish procedures for the review of student requests to attend school in another school district.

END OF POLICY

Legal Reference(s):

ORS 327.006	ORS 339.141	ORS 433.267
ORS 329.485	ORS 339.147	
ORS 332.107	ORS 339.155	OAR 581-021-0019
ORS 335.090	ORS 339.250	
ORS 339.115 - 339.133	ORS 343.221	

Illegal Immigration and Immigration Reform Act of 1996, 8 U.S.C. §§ 1101, 1221, 1252, 1324, 1363, 1367 (2012). McKinney-Vento Homeless Assistance Act, Subtitle VII-B, reauthorized by Title IX-A of the Every Student Succeeds Act, 42 U.S.C. §§ 11431-11435 (2012).

Every Student Succeeds Act, 20 U.S.C. § 7912 (2012).

_

¹ Districts are encouraged, but not required to explore other appropriate options such as an agreement with a neighboring district to accept transfer students, if there is not another school in the district in which the student legally resides for the transferring student.

² "School of origin" means a school that the student attended when permanently housed or the school in which the student was last enrolled.