Culver School District 4J

Code: **JECB-AR(6)** Adopted: 02/10/15

Application for Resident Student to Transfer out of Resident District

For School Year		Student Grade Level		e Level			
Student Information							
Legal First Name_		Legal Mid	albb	NameLe	egal Last Nam	ne	
Date of Birth		Mailing Address		2SS			
City		State		Zip	Zip Code		
Physical Address							
City		State		Zip	Zip Code		
Primary Phone of Parent/Guardian_				Secondary	Phone		
Parent Email Address							
	S	CHOOL DISTRICT YO	U WC	OULD LIKE YOUR CHILD TO ATT	TEND		
Bend-La Pine 🗆	Crook County	Redmond	Je	efferson County 509J 🗆	Sisters □	Other	
School (1st Choice	<i>2</i>):		-	School (2 nd Choice):			
EXPULSION							
Is the student currently expelled? Yes No If yes, please provide the term expulsion:							
Has the student been expelled at any time during the last 12 months for a reason involving firearms? Yes No If yes, please provide the reason for and the term of the expulsion:							
PLEASE NOTE THAT COMPLETION OF THIS FORM DOES NOT ENSURE A TRANSFER FOR YOUR CHILD.							
Any agreement is between the two school districts. All requests are carefully considered by the Superintendents.							
I hereby certify the information I have provided is true and I understand that falsely responding to any of the questions herein will result in denial and/or revocation of this application. I certify that I am the parent or guardian in legal custody of the student.							
Parent/Guardian Name (Person in Parental Relationship)(please print)							
Signature of Parer	nt/Guardian				Date		
For Office Use Only:							
Final Action of Resident District:							
Superintendent/Designee			Date:				

09/05/14|PH