

ACKNOWLEDGEMENTS

- I certify that the information provided is accurate and complete.
- I understand that approval of this request shall be dependent upon the acceptance and rejection standards stated in the nonresident school district's policy, and rescindment (revoking) of this transfer may occur in accordance to the conditions listed in the nonresident school district's policy.
- I understand that my student must continue to attend the resident school until the effective start date of the transfer and that nonattendance is subject to truancy procedures.
- I understand that I will be responsible for providing transportation to and from school for my student, unless the nonresident district is required to provide transportation for the student with a disability under Section 504 of the Rehabilitation Act of 1973 or the Individuals with Disabilities Education Act (IDEA).
- I understand that requests are approved for one school year only, and it is my responsibility to complete a new form each year.
- I understand that should my student move and no longer be a resident of the district, the transfer expires and I must submit a new request to the new resident school district.
- FERPA Release: I authorize the resident school district to release any and all of my student's educational records to the Choice Coordinator of the nonresident school district. By my signature I acknowledge that although I am not required to release my student's records, I am giving my consent to release the information. This release will remain in effect while my student is enrolled unless I revoke such consent in writing. Note: Information will be provided in written format; no information will be released over the phone.

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232(g); 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies. Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record.

Signature of parent/guardian (Student may sign if 18 years or older at the time of this request)

Date

TO BE COMPLETED BY RELEASING SCHOOL DISTRICT

The _____ School District hereby releases the above named student and waives attendance claims and state apportionment claims for said student for the _____ school year. If the accepting district levies any tuition charges the resident district will not pay them.

Signature of Superintendent/Designee

Date

If the application is denied by the superintendent or designee, it shall be deemed the final decision of the school district. This final decision may be appealed to the Superintendent of Public Instruction in accordance with WAC 392-137, a copy of which is available for review through the office of the superintendent.

TO BE COMPLETED BY CSD BUILDING ADMINISTRATOR

Request Granted

Request Denied

Y N Space is available in the grade level or classes at the building in which the student desires to be enrolled.

Y N Appropriate educational programs or services are available to improve the student's condition as indicated above.

Y N Would the student's attendance in the district increase a risk to the health or safety of other students or staff?

Y N Would acceptance of the student result in the district experiencing a financial hardship? (If yes, the student is not eligible for attendance.)

Signature of Building Administrator

Date

Signature of Special Services Director

Date

TO BE COMPLETED BY CSD ADMINISTRATION OFFICE

Request Granted

Request Denied

Signature of Superintendent/Designee

Date

Return signed & completed form to: Chimacum School District, PO BOX 278, Chimacum, WA. 98325 Fax: 360.732.4336